



Columbus Woodworks Inc
Merchandise Return Form

Order Number: _____ Order Date: _____

Customer Name: _____

Billing Address: _____

Shipping Address: _____

Return Merchandise Authorization Number (RMAN#): _____

Item(s) To Be Returned: _____

Reason(s) For Return: _____

Signature: _____

Date: _____

Please include this form with your return shipment and note your RMAN# on the shipping label.