$\mathcal{C}$	GASSER CHAIR COMPANY, INC. 4136 Loganway Youngstown, Ohio 44505 Phone: (330)759-2234 Fax: (330)759-9844 sales@gasserchair.com		4505 34 4	RETURN MATERIAL PACKING LIST   Sales Order No.   Date				
Sold To: (As appears on order)				Ship To:(As appears on order)				
Name	Name			Name				
Stree	Street			Street				
			Zip					
Phon	e							
Fax								
EMai								
	Being Re							
tem#	Part #		Item # & Description	Unit	Order Qty.	Shipped	Returning	
							_	
							_	

## **Instructions**

- 1. Call us at 1-800-323-2234 between 8:00 AM and 5:00 PM EST to obain a Return Materials Authorization (RMA) number.
- 2. Complete information on top half of this form
- 3. Enter the Return Materials Authorization (RMA) number on the label below. Cut out label from this page.

4. Place items to be returned along with this form in carton and seal.

5. Affix label to carton and ship to us prepaid.

	RMA#
Gasser Chair Co	mpany, Inc.
Attn: Customer	
2547 Logan Aven	ue
Youngstown, OH	