

# WINSTON FURNITURE COMPANY, INC.

☐ WINSTON ☐ VINEYARD ☐ MOLLA ☐ TRADEWINDS ☐ STUARTCLARK ☐  
WERNER WOODS ☐ ARTISTIC ACCENTS

Quality Control Department

**Dedicated Fax Line # 205 486-0072**

This form should be used for all **e-mailed** Quality Complaints

Date:8/8/08

Account #	<i>Ship To Information</i>
Email: warranty@leadersfurniture.com	
Acct. Name Leaders Casual Furniture	<i>Name same</i>
Address 6303 126 <sup>th</sup> ave n	<i>Address</i>
City largo	<i>City</i>
State fl Zip 33773	<i>State Zip</i>
Telephone# 727-538-5577 ext 275	<i>Fax # 727-524-8161</i>
Contact Name STEPHANIE	<i>P.O. # or Tag Michael</i>

Quantity	Model #	Frame Color	Fabric/Strap	Ack#/Inv#	Purchase Date
6	8059	TWH	262	117226	5/30/00

BRIEF EXPLANATION OF PROBLEM i.e.; WELDS,  
FINISH, FREIGHT DAMAGE

**FRAMES PEELING & 1 WITH BROKEN BOLT**

WINSTON'S QUALITY DEPARTMENT DISPOSITION TO SOLVE PROBLEM

RETURN MERCHANDISE AUTHORIZATION MAILED ☐ YES ☐ NO

QUALITY CONTROL REFERENCE NUMBER

QUALITY CONTROL CONTACT NAME