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: 09/22/09
Account #	Ship To Information
Email: warranty@leadersfurniture.com	
Acct. Name Leaders Casual Furniture	Name same
Address 6303 126 th ave n	Address
City largo	City
State fl Zip 33773	State Zip
Telephone# 727-538-5577 ext 275	Fax # 727-524-8161
Contact Name	P.O. # or Tag Moore

Quantity	Model #	Frame Color	Fabric/Strap	Ack#/Inv#	Purchase Date
2	1135		227a	438718	9/04/09

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

Received sling with hole

WINSTON'S QUALITY DEPARTMENT DISPOSITIO	N TO SOLVE PROBLEM
RETURN MERCHANDISE AUTHORIZATION MAILED	□ YES □ NO

QUALITY CONTROL REFERENCE NUMBER
QUALITY CONTROL CONTACT NAME