

## SHIPMENT AND RETURN FORM

SUBMITTED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

CAMPUS: \_\_\_\_\_ BLDG: \_\_\_\_\_ ROOM: \_\_\_\_\_ EXTENSION: \_\_\_\_\_

**INSTRUCTIONS:** THIS FORM IS TO BE COMPLETED BY THE REQUESTOR AND SUBMITTED TO CENTRAL RECEIVING WITH ANY ITEM(S) TO BE RETURNED TO THE VENDOR OR SHIPPED OFF CAMPUS. CENTRAL RECEIVING WILL DIRECT **ALL** SHIPMENTS.

SHIP TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ATTENTION: \_\_\_\_\_ RA: \_\_\_\_\_

PRODUCT DESCRIPTION: \_\_\_\_\_

BRAND/MODEL: \_\_\_\_\_

MC NO.: \_\_\_\_\_ SERIAL NO.: \_\_\_\_\_ VALUE (\$): \_\_\_\_\_

RETURN FOR CREDIT, P.O. # \_\_\_\_\_ WARRANTY REPAIR, P.O. # \_\_\_\_\_

REPAIR, MAINTENANCE CONTRACT # \_\_\_\_\_

BILL AGAINST P.O. # \_\_\_\_\_ INVOICE #: \_\_\_\_\_

REASON FOR RETURN (BE SPECIFIC, USE ATTACHMENTS IF NECESSARY)

### SHIPPING ADDRESS

SHIP TO: MONTGOMERY COLLEGE  
ATTEN: SHIPPING RECEIVING  
7602 STANDISH PLACE  
ROCKVILLE, MARYLAND 20855

**IF SHIPMENT IS HAND CARRIED TO THE VENDOR, PLEASE HAVE A VENDOR REPRESENTATIVE SIGN AND DATE BELOW, AND FORWARD A COPY OF THE SIGNED FORM TO CENTRAL RECEIVING:**

VENDOR(S) SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_