



Capital Wholesale Drug Company

## **Return Goods Policy**

**(Effective February 16, 2009)**

Capital Wholesale Drug Company (Capital Drug)  
873 Williams Avenue, Columbus, OH 43212

Phone: 800-525-0022  
Fax: 800-536-9686

### **RETURN AUTHORIZATIONS**

Contact your account representative to obtain a Return Goods Authorization Form and to discuss the merchandise you wish to return. Merchandise returned without an approved Return Goods Authorization Form will not receive credit.

### **MERCHANDISE ELIGIBLE FOR RETURN**

- Any merchandise up to 3 months past expiration date unless otherwise defined in the manufacturer return goods policy.
- Merchandise must be unopened and in acceptable condition (no markings or tags).
- Full credit will be given for shipping errors made by Capital Drug and for products damaged in shipment, provided the error or damage is reported within 72 hours of receipt of the product.

### **NON-RETURNABLE MERCHANDISE**

- Merchandise opened and marked on.
- Merchandise marked on invoice as final sale.
- Merchandise that is 3 months past expiration date and/or merchandise that falls outside of manufacturer return goods policies.
- Merchandise without an approved RGA number.
- Refrigerated items (unless outdated within manufacturer return goods policy).
- Merchandise not purchased directly from Capital Drug.

### **PROCEDURE FOR RETURNING MERCHANDISE**

- Obtain a Return Goods Authorization Form and complete all sections. Incomplete forms will be rejected and returned requesting all sections be completed in full.
- FAX the completed form to the FAX number indicated above for review and approval. Return requests will be reviewed and approved/disapproved within 3 business days of receipt.
- Approval will be in the form of the RGA number assigned to the Return Goods Authorization Form and is valid only until the date reflected on the Return Goods Authorization Form. Merchandise received after the date indicated on the Return Goods Authorization Form may not receive credit.
- Merchandise must be accompanied by a copy of the approved Return Goods Authorization Request Form. Merchandise received in excess of the approved quantity and without a copy of the completed and approved Return Goods Authorization Form will not receive credit.
- RGA numbers must be indicated on the outer container of all packages and addressed to the attention of:  
Capital Drug  
ATTN: Return Goods Department  
873 Williams Avenue  
Columbus, OH 43212

### **TERMS OF RETURN POLICY**

- Capital Drug reserves the right to not accept any returns from inactive accounts, accounts with a past due balance, or stores in the process of closing or selling.
- Capital Drug reserves the right to apply any and all credits to outstanding past due invoice's and then to customer's account.
- Capital Drug reserves the right to not issue credit unless past due disputes for return goods have been resolved.
- Capital Drug reserves the right to destroy merchandise that is ineligible for credit or returned without prior authorization. Credit for returned product is issued at the price indicated on the Return Goods Authorization Form which represents the invoice price or the current selling price, whichever is less.
- A Handling Fee of 20% will be assessed against the amount of the credit.

Capital Wholesale Drug Company reserves the right to amend this policy which supersedes all previous Return Goods Policies. This Return Goods Policy is automatically incorporated into any prior customer supply agreements and or written contracts.