



## RETURNS FORM

Name: \_\_\_\_\_ Order number: \_\_\_\_\_ Date: \_\_\_\_\_ Location: \_\_\_\_\_

Order number	Date Received	Description	Qty	Amount paid	Reason for return

Package opened: Yes  No

Item in good condition: Yes  No

Original packaging available: Yes  No

Comments: \_\_\_\_\_  
\_\_\_\_\_

### OFFICIAL USE ONLY:

Quality Control: Pass  Fail

Customer Service: Refund  Cash  Credit

Processed by: \_\_\_\_\_

Processed by: \_\_\_\_\_