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# SALES RETURN & ALLOWANCE

TRANSACTION ID:

DATE:

## CUSTOMER & ORIGINAL SALE INFORMATION

CUSTOMER NAME:

PHONE NUMBER:

EMAIL ADDRESS:

ORIGINAL RECEIPT #:

ORIGINAL SALE DATE:

PROCESSED BY:

## TRANSACTION TYPE

FULL RETURN (REFUND)

PARTIAL RETURN

SALES ALLOWANCE (PRICE ADJUSTMENT)

## ITEMIZED DETAILS

SKU / ITEM #	ITEM DESCRIPTION	QTY	UNIT PRICE	RETURN/ALLOW. AMT	REASON CODE

SUBTOTAL	
TAX REFUNDED	
RESTOCKING FEE (DR.)	
TOTAL CREDIT / REFUND	

**REFUND METHOD**

**ORIGINAL CREDIT CARD**

**CASH**

**STORE CREDIT / GIFT CARD**

**OTHER**

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**CUSTOMER SIGNATURE DATE**

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**AUTHORIZED REPRESENTATIVE DATE**