# WHOLESALE RETURN & REFUND FORM

Bulk Order Processing Department

**Company Name:**

**Account Number:**

**Contact Person:**

**Email / Phone:**

**RMA Number:**

**Date of Request:**

**Original Invoice #:**

**Original Order Date:**

## RETURNED ITEMS DETAILS

| SKU / Item code | Item Description | Qty Ordered | Qty Returned | Reason Code* | Unit Price ($) |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

***Reason Codes:** A: Damaged in Transit | B: Defective / Quality Issue | C: Incorrect Item Received | D: Overstock / Buyback | E: Other (Please specify below)

## REASON DETAILS & COMMENTS

## REQUESTED RESOLUTION

☐ Account Credit / Credit Memo
☐ Replacement Items
☐ Refund to Original Payment Method

## AUTHORIZED SIGNATURES

Customer Authorized Representative (Signature & Date)

Wholesale Account Manager (Signature & Date)