

MERCHANDISE RETURN TRACKING

Retail Sales Records

RETURN INFORMATION

Date of Return:

Transaction ID:

Original Receipt #:

Processed By (ID):

CUSTOMER INFORMATION

Customer Name:

Phone Number:

Email Address:

Loyalty Member ID:

RETURNED ITEMS

SKU / ITEM #	ITEM DESCRIPTION	QTY	UNIT PRICE	REASON CODE	ACTION TAKEN

Return Reason Codes:

A: Defective / Damaged **B:** Incorrect Item / Size **C:** Not as Pictured / Described **D:** Changed Mind / Buyer's Remorse **E:** Late Delivery
F: Other (Specify in comments)

REFUND METHOD

Original Credit/Debit Card Cash

Store Credit / Gift Card Even Exchange

Comments:

FINANCIAL SUMMARY

Subtotal Refund: _____

Sales Tax Refunded: _____

Restocking Fee (deducted): _____

Total Refund Amount: _____

Customer Signature

Authorized Manager Signature