

# RETURNED GOODS AUTHORIZATION

**TO BE COMPLETED IN FULL BY THE REQUESTER**

COMPANY	DATE
REQUESTED BY (NAME)	CUSTOMER P.O. No.
DEPARTMENT	SALES ORDER No.
ADDRESS	TELEPHONE

	QTY.	PART No.	DESCRIPTION
<b>ITEMS</b>			
<b>TO</b>			
<b>BE</b>			
<b>RETURNED</b>			

**REASON FOR RETURN:**

- |                                             |                                                    |                                                |
|---------------------------------------------|----------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> PROCESSING ERROR   | <input type="checkbox"/> CUSTOMER CANNOT USE       | <input type="checkbox"/> CANCELLED             |
| <input type="checkbox"/> SHIPPING ERROR     | <input type="checkbox"/> CONSIGNMENT (LOAN) RETURN | <input type="checkbox"/> DAMAGED IN TRANSIT    |
| <input type="checkbox"/> ORDERED IN ERROR   | <input type="checkbox"/> TRADE-IN                  | <input type="checkbox"/> DEFECTIVE             |
| <input type="checkbox"/> DUPLICATE SHIPMENT | <input type="checkbox"/> EXCHANGE                  | <input type="checkbox"/> OTHER (SPECIFY) _____ |

**EXPLANATION OF REASON CHECKED ABOVE:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

REQUESTED BY \_\_\_\_\_ DATE \_\_\_\_\_

**FOR COMPANY USE:**

**RECOMMENDED DISPOSITION:**

- |                                                            |                                                 |                   |                              |
|------------------------------------------------------------|-------------------------------------------------|-------------------|------------------------------|
| <input type="checkbox"/> 1. REPAIR AND RETURN TO CUSTOMER  | <input type="checkbox"/> 3. RETURN TO INVENTORY | 5. RESTOCKING FEE | <input type="checkbox"/> YES |
| <input type="checkbox"/> 2. REPAIR AND RETURN TO INVENTORY | <input type="checkbox"/> 4. ISSUE CREDIT        | AMOUNT _____      | <input type="checkbox"/> NO  |

**REPLACEMENT:**  REQUESTED  ISSUED

**REPLACE (D) WITH:**

\_\_\_\_\_

\_\_\_\_\_

APPROVAL BY \_\_\_\_\_ DATE \_\_\_\_\_