

Retail Customer Return Verification Document

Document No.

Date

Store Location

Customer Name

Contact Number

Email Address

Customer Address

Return Information

Receipt/Order No.

Purchase Date

Return Reason

Item(s) Returned

| Item Name/Description | Item Code/SKU | Quantity | Price | Condition |
|-----------------------|---------------|----------|-------|-----------|
| | | | | |
| | | | | |

Additional Comments

Verification

Customer Signature

Name

Staff Signature

Name
