Returned Goods Inspection Checklist

Inspector Name

Date

Supplier/Customer Name

Purchase Order Number

Return Reference/ID

Returned Goods Details

Item Description	Quantity Returned	Unit	Reason for Return

Inspection Checklist

☐ Packaging Condition

☐ Product Intact/Undamaged

☐ Correct Labeling

☐ Serial/Batch Number Match

☐ Quantity Match

☐ Cleanliness

☐ Other (Specify Below)

Other comments, observations, or noted issues

Disposition

☐
 Accepted

☐
 Rejected

Disposition comments or actions required

Inspector Signature

Date

Manager Review/Signature (if required)

Date