

Retail Outlet Price Adjustment Approval Memorandum

To: _____

From: _____

Date: _____

Subject:
Request for Price Adjustment Approval

A. Outlet Details

Outlet Name: _____

Location: _____

Outlet Code: _____

B. Item(s) for Price Adjustment

Item Code	Description	Current Price	Proposed Price	Reason for Adjustment
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

C. Justification & Remarks

Effective Date of Adjustment: YYYY-MM-DD

Prepared By
Name & Position

Reviewed By
Name & Position

Approved By
Name & Position