

# Incorrect Item Return Authorization Form

## Customer Information

Full Name

Email

Phone Number

## Purchase Details

Order Number

Purchase Date

## Item Information

Item Received (Description / SKU)

Item Ordered (Description / SKU)

Quantity

## Return Details

Describe the Incorrect Item Issue

Condition of Item Received

 Select 

Additional Comments

**For Store Use Only**

Authorization Status

Select



Processed By (Employee Signature)

Date Processed