



RETURN / EXCHANGE FORM

FROM:	EXCHANGE <input type="checkbox"/> (select one)
	RETURN <input type="checkbox"/> (select one)
SHIP TO:	RETURN/ EXCHANGE DATE:
	CUSTOMER ORDER #

ITEM(S)	SKU NUMBER	UNITE PRICE	UNITE COUNT	TOTAL AMOUNT
DATE ORIGINALY ORDERED:	NOTE:			
DATE RECEIVED:				

REASON FOR RETURN / EXCHANGE