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GOODS RETURN FOR CREDIT FORM

Account Name:		**Account Number:**
Contact Name:	**Contact Phone No:**	**Date:**
Original Invoice #:	**Original Date Purchased:**	

Goods Being Returned

QTY	Part No.	Description	Reason for Return

Office Use Only

Return Action: **Accepted** ☐	**Credit Note No.**	**Rejected** ☐
Notes:		
Name & Signature:		**Date:**