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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	QTY Part No.		Description		Reason for Return	
Office Use Only						
Return Action:	Accepted	Credit Note No.		Rejected		
Notes:						
Name & Signature:				Date:		