

Retail Store Return and Exchange Sheet

Please complete this form for all product returns and exchanges. This document is for store records and printing purposes.

1. Customer & Transaction Information

Customer Name: Date:

Phone Number: Email Address:

Original Receipt #: Processed By (Associate):

2. Returned Items

Item Number / SKU	Description	Quantity	Price Paid (\$)	Reason for Return
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="e.g., Defective, Wrong Size"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

3. New Items (Exchanged Items Purchased)

Item Number / SKU	Description	Quantity	New Price (\$)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

4. Transaction Summary & Totals

Total Returned Value (\$):

Total Exchanged Value (\$):

Difference / Balance (\$):

Refund Method / Payment Method:

5. Authorization & Signatures

By signing below, the customer acknowledges the return/exchange details above and the store representative verifies the received items.

Customer Signature: Date:

Manager/Associate Signature: Date: