

In-Store Exchange and Refund Slip

This slip must be filled out by the store associate for all product returns, refunds, or exchanges. Print the completed form for the customer signature and store records.

1. Transaction Details

Date: Store Location/ID:
Original Receipt #: Associate ID:

2. Customer Information

Customer Name:
Phone Number:
Email Address:

3. Returned Item(s)

Item SKU / Barcode	Description	Quantity	Price Paid	Reason for Return
<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"/>

4. Action Taken

Option A: Refund Processed

Total Refunded Amount:
Refund Method (Cash, Card, Store Credit):

Option B: Exchange Issued

New Item SKU	Description	Quantity	New Item Price
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Exchange Balance:

Amount Due to Customer:
Amount Owed by Customer:

5. Signatures (Sign upon printing)

By signing below, the customer acknowledges the accuracy of this transaction and receipt of the indicated refund or exchange items.

Customer Signature: _____ Date:
Store Manager/Associate Signature: _____ Date: