

Item Return Refund Receipt Sheet

Receipt No.

Date

Customer Name

Contact

Address

| No. | Item Name / Description | Item Code | Qty | Unit Price | Total |
|---------------------|-------------------------|-----------|-----|------------|-------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Total Refund Amount | | | | | |

Reason for Return/Refund:

Customer Signature

Processed By

Authorized Signature