RETURN OF MERCHANDISE FORM

FORMA PARA DEVOLUCION DE MATERIAL

Date/ Fecha:	**Acc No & Name/** No de cuenta y Nombre	**Phone No./** Telefono

DISCREPANCY CODES/ Codigos de discrepancia	
A. OVERSTOCK (8% Restocking fee will apply)	**E. ORDER WAS CANCELLED/** Orden Cancelada
B. DID NOT ORDER/ No lo ordeno	**F. INCOMPLETE ORDER/** Orden Incompleta
C. OVERSHIPMENT/ Enviado por Error	**G. DEFECTIVE/** Material Defectuoso
D. DUPLICATED ORDER/ Orden Duplicada	

FOR OFFICE USE ONLY
ARRIVAL DATE:
CREDITED DATE:
BY/ Procesado por:

						FOR OFFICE USE ONLY	
ITEM No. No de articulo	**ITEM DESCRIPTION** Descripcion de Articulo	**QTY** Cant.	**INV. No.** No. de fact	**INV Date** Fecha fact	**Code**	**DEFECTIVE** Defectuoso	**INVENTORY** Inventario

SHIPING ADDRESS: 5507 Brooks St. - Montclair, CA 91763 **MAILING ADDRESS: P.O. Box 2369 - Montclair, CA 91763**

Notes/ Notas: