

FLOORS @ WORK

We Make It Happen

PRODUCT RETURN AUTHORIZATION

Date:	
From:	
Invoice #	

Product Description	Color Name	Quantity	Reason and Condition of the Product Being Returned	Batch Number as shown on the Returned Boxes

Customer's Name: _____

For Office Use Only			
Authorization #:		Restocking Charge:	
Territory Manager Approval:			
Senior Manager Approval:		Signature:	