

PRODUCT(S) RETURN FORM FOR ASA ORGANIC Oils

Product No.

Address

Supplier Code

Tel. No.

Supplier Name

Date of Purchase

S/N	Reason for Return of Product(s) (*)	Container Size (*)	Invoice No.	Qty	UOM	Notes
Total						

(*) DP – Damage Product(s), DO – Duplicate Order IP – Incorrect Product(s)-----

Requested By: ----- **Date:** ----- **Signature:** -----

Approved By: ----- **Date:** ----- **Signature:** -----