



Return Authorization Form

Save Files As

Email File

*See bottom of next page for instructions.

Store Or Business Information (for additional stores, please attach additional forms)

Department / Name	
Company Name	
Address	
City/State/Zip	
Contact	
Phone	

PO#	
Return Date	
Invoice #	
Copy of Invoice Attached	<input type="checkbox"/> Yes <input type="checkbox"/> No

Items To Be Returned

SKU/Ref #	Piece Count	Box Count	Description	Reason #

Reasons for return: Please list the reason number in the box over.

- 1. Pulling error by Breyting Community Roaster™
- 2. Pulling error by Distributor
- 3. Billing error
- 4. Duplicate order
- 5. Samples
- 6. Customer Service error
- 7. Purchasing error
- 8. Shorted by Breyting Community Roaster™
- 9. Shorted by Distributor
- 10. Account Representative error
- 11. Customer did not order
- 12. Customer ordered wrong
- 13. Defective/Damaged
- 14. Merchandise destroyed

Continued on next page

Address & Pick Up Information

Company Name	
Address	
City/State/Zip	
Contact	
Phone	
Email	
Best Pick Up Time	
Customer Signature (If faxed)	
Picked Up By	

Please explain damages and/or defects in detail:

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