

# Children's Toy Store

## Return Approval Sheet

Date: \_\_\_\_\_  
\_\_\_\_\_

Return Number: \_\_\_\_\_

Customer Name: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Address: \_\_\_\_\_

Original Receipt Number: \_\_\_\_\_

Purchase Date: \_\_\_\_\_

### Returned Items

Item Name / Description	SKU/Code	Quantity	Reason for Return	Condition

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approved by (Name & Signature): \_\_\_\_\_  
Date: \_\_\_\_\_

Processed by (Staff): \_\_\_\_\_