

Retail Store Manager Cash Refund Approval Sheet

Date

Store Name/Number

Refund No.

Customer Details

Customer Name

Contact Number

Receipt/Invoice #

Refund Item(s) Details

SKU/Item Code	Item Description	Qty	Unit Price	Total	Reason for Refund

Total Refund Amount

Payment Type

Manager Review Notes

Customer Signature

Date

Processed By (Staff)

Date

Manager Approval Signature

Date

