Product Return Form

Customer Name: _____
Address : _____
Telephone : _____
Email : _____

Order No : _____
Order Date : _____

No	Item Name	UOM	Qty	Reason for Returning Goods (*)	Price w/o Tax
				Total	

(*) DG – Damaged Goods, DO – Duplicate Order, IG – Incorrect Goods, UOM – Units of Measure

Requested by Signature: _____ Date: _____

Submit by Email: askus@PocketRocketCoffee.com

Submit by Mail: Pocket Rocket Coffee, c/o Planet Commerce, 1309 Coffeen Avenue STE 1234, Sheridan, Wyoming, 82801

**for Pocket Rocket Staff*

Approved by: _____ Date: _____ Signature: _____