

## **Procreative Marketing Private Limited**

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## Product Return/ Replace/ Exchange Form

| Independent Distributor Name: | ID No.: | Dated: | / | / |
|-------------------------------|---------|--------|---|---|
| Mobile No.:                   |         |        |   |   |
| Sales Invoice No. with Date:  |         |        |   |   |
| Purchased From:               |         |        | _ |   |

## Product Description:

| Name of Product | Qty. Returned | Qty. Accepted | Qty. Rejected | Amount | Remarks |
|-----------------|---------------|---------------|---------------|--------|---------|
|                 |               |               |               |        |         |
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|                 |               |               |               |        |         |
|                 |               |               |               |        |         |

Logistics I/C

| For Office Use Only              |                                     |  |  |  |
|----------------------------------|-------------------------------------|--|--|--|
| Accounts:                        |                                     |  |  |  |
| Return Invoice/ Credit Note No.: | Date:/ / Amount:                    |  |  |  |
| Amount Refunded:                 | Cash/Bank:                          |  |  |  |
| Exchange Invoice No.:            | Date:/ / Amount: Courier/Transport: |  |  |  |
|                                  | Docket/GR No.:Date:/ /              |  |  |  |
|                                  |                                     |  |  |  |
| Accounts I/C                     | Logistics I/C                       |  |  |  |