



The Smencil Company
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Merchandise Return Form

School/Group Name: _____	Date: _____
Contact Name: _____	Invoice Number: _____
Email: _____	Phone: _____

Items Returned

Quantity:	Description of Product:	Unit Price:	Total Price:

Reason For Return: _____

For Office Use Only

Date Received: _____	Received By: _____
Refund Amount: _____	Invoice Number: _____

* We only accept returns of un-opened buckets on case shipments within 90 days of order.