

RETURN WORKSHEET

SOUTHERN MOTORCYCLE SUPPLY*** SUBJECT TO INSPECTION/APPROVAL

3670 RUFFIN ROAD

SAN DIEGO, CA. 92123-1810

858-560-5005/ 800-748-5750

FAX 858-560-4626/800-242-4626

DATE OF WRITE UP: _____

DEALER ACCOUNT # _____

DEALER NAME _____

PART#	QTY	DESCRIPTION	UNIT PRICE

REASON FOR RETURN/APPROVED BY: _____

CREDIT___ EXCHANGE___ REPLACE___ RS%___ INV#___ DATE___

WAREHOUSE: BACK TO STOCK___ TO DAMAGE AREA___ OTHER___

PART#	QTY	DESCRIPTION	UNIT PRICE

REASON FOR RETURN/APPROVED BY: _____

CREDIT___ EXCHANGE___ REPLACE___ RS%___ INV#___ DATE___

WAREHOUSE: BACK TO STOCK___ TO DAMAGE AREA___ OTHER___

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WAREHOUSE: BACK TO STOCK___ TO DAMAGE AREA___ OTHER___

DATE RETURNED : _____ NOTES: _____ CONTROL # _____