



KAPOW TOYS

PRODUCT RETURNS FORM

Customer Information (please complete in full)

Order Number: _____ Date: _____

Customer Name: _____

Item(s) returned: _____

Reason for return:

- Faulty Damaged Not as expected Wrong item
 Other

Requested action:

- Refund Replacement

Customer signature:

Office use

Approved by: _____ Approval date: _____

Signature
