

# Data Sheet for **Returns**

RMA-No.:

<b>Order information</b>			
Customer-No.:			
Customer / Company:			
Contact Name:			
Address:			
E-Mail:			
Order-No.:		Delivery Note-No.:	
Customer Order-No.:		Customer Delivery Note-No.:	
Date:		FSE:	
Copy of Invoice enclosed:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Invoice-No.:	
Original Delivery Note enclosed:	<input type="checkbox"/> Yes <input type="checkbox"/> No		

<b>Reason for Return</b>		
<input type="checkbox"/> Credit Note	<input type="checkbox"/> Complaints	<input type="checkbox"/> Test Tooling(s)
<input type="checkbox"/> Rework / Modifying		

<b>Tool Data</b>		
Quantity	Product	Reason for Return / Description

Incoming Goods at:	Accepted by:
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20588/103/2024