

RETURN TO WAREHOUSE STOCK

STOCK REQUISITION NUMBER

Section A: School or Department Completes

Date	School or Department Name	Requestor

Quantity	Unit of Measure	Warehouse Catalog Number	Product Description

<p>SPECIFY REASON FOR RETURN (Ex: Defective, Order Error, Warehouse Delivery Error)</p> <p>Reason: _____</p>



SCHOOL/DEPT: EMAIL COMPLETED FORM TO KEITH.SIMON@SMUSD.ORG

Section B: For Purchasing / Warehouse Use Only

<p style="text-align: center;">WAREHOUSE USE ONLY</p> <p>Picked Up By: _____ Date: _____</p> <p>Exchange Completed By: _____ Date: _____</p> <p>Warehouse Comments: _____</p>	<p style="text-align: center;">PURCHASING USE ONLY</p> <p style="text-align: center;">STOCK ADJUSTMENT POSTED</p> <p>DATE _____</p> <p>INITIALS _____</p> <p>If Warehouse delivery error, then NO adjustment is required.</p>
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