



ENAGIC® (MALAYSIA) SDN BHD

Company No.: 971103-W

Direct Sales License No.: AJL931978

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SALES CANCELLATION
GOODS RETURN APPLICATION FORM

| | | | |
|--------------------------|--|-------------------|--|
| APPLICATION DATE: | | ID NUMBER: | |
|--------------------------|--|-------------------|--|

| | | | |
|---|--|---|--|
| A. <u>PRINCIPAL INFORMATION.</u> | | | |
| Purchaser's Name: | | | |
| NRIC or Company No: | | Date of Birth: | |
| Address: | | | |
| Contact No: | | Email: | |
| Date of Purchase: | | | |
| B. <u>ATTACHMENT.</u> <i>**Kindly attach any relevant documentations**</i> | | | |
| Goods Description: | | Invoice No: | |
| Payment Details Information: | | | |
| C. <u>CREDIT NOTE.</u> | | | |
| Sales Cancel/Goods Return Reason | | | |
| Credit Note (REFUND) Amounts: | | | |
| D. <u>MISC.</u> | | | |
| <u>Purchaser</u> | | <u>Customer Service</u> | |
| Name & Signature: | | Name & Signature: | |
| Date: | | Date: | |
| <u>Stock Department</u> | | <input type="checkbox"/> Goods returned in good condition. | |
| Name & Signature: | | <input type="checkbox"/> Goods returned in damaged condition. | |
| Date: | | Others: | |
| <u>Commission Department</u> | | <input type="checkbox"/> Commission returned on date: | |
| Name & Signature: | | <input type="checkbox"/> Commission has not yet to be paid. | |
| Date: | | | |
| <u>Management:</u> | | <input type="checkbox"/> Approved. | |
| Name & Signature: | | <input type="checkbox"/> Rejected. | |