



Credit Slip

Agency Name _____ Date _____

Please complete the form below with information from the invoice on which the product being returned was received.

Please return product to the Brazos Valley Food Bank for credit.

No credit will be given for product returned without this form.

Invoice No:	Product Reference	Description	Case quantity or Pounds/number of cans	Reason for return
Example1: 304568	RTESNX	Snacks, Ready to Eat	2	Did not order
Example2: 305689	Asst product	Varies	365	dented

Agency Signature _____

Brazos Valley Food Bank Staff Signature _____