**Penn State University**

**Housing & Food Services**

**Produce Request for Credit or Replacement**

Unit Name:       Date:

Vendor Name:

Please indicate if replacement is needed:

Yes (Please call purchasing ASAP to make arrangements for replacement product)

No

Item #      Item Description:

Quantity:       Price/unit:

Total Credit Due:

Code # if applicable:

Invoice #:       Date Received:

Reason for Credit:

Crushed/Damaged Cases  Country of Origin Incorrect

Moldy/Rotten

Under Ripe

Over Ripe

Other Product Quality Issue (Please Specify):

Other (Please Specify):

Incorrect Product (Please Specify):

**For Vendor Use Only:**

Approved Credit Request

Vendor Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please sign approval of credit request and fax to Penn State HFS purchasing:

Phone: 814-865-6386 Fax: 814-863-4577