

REFUND INVOICE

[Venue Name]
[Address Line 1]
[City, State, Zip]

Invoice #: _____
Date: _____
Original Booking #: _____

Client Information:

[Name/Organization]
[Mailing Address]
[Phone/Email]

Event Details:

Venue Space: _____
Original Date: _____
Reason for Refund: _____

Description of Fees	Original Amount	Refund %	Refund Total
Venue Rental Fee	\$0.00	_____%	\$0.00
Technical/Staffing Fees	\$0.00	_____%	\$0.00
Security Deposit	\$0.00	_____%	\$0.00
Equipment Rental	\$0.00	_____%	\$0.00

Subtotal Refund: \$0.00

Less Cancellation/Processing Fees: (\$0.00)

Total Refund Amount: \$0.00

Refund Method: _____

Transaction Reference: _____

Authorized Signature: _____ Date: _____

Please allow 7-10 business days for the funds to reflect in your account. This document serves as a formal record of the credit transaction.