

CREDIT INVOICE

Reference: [Invoice Number]

Date: [Date]

[Company Name]

[Street Address]

[City, State, Zip]

[Tax ID/VAT]

Bill To:

[Customer Name]

[Customer Address]

[Customer Contact]

Original Transaction:

Original Invoice #: [Number]

Original Date: [Date]

Refund Reason: [Reason Code]

Description	Qty	Unit Price	Amount
[Item Description]	[0]	[0.00]	[0.00]
[Item Description]	[0]	[0.00]	[0.00]
Subtotal: [0.00]			
Tax: [0.00]			
<hr/> Total Credit: [0.00]			

Certification Statement:

I hereby certify that the above refund credit process is valid and the items listed have been processed according to corporate return policies.

Authorized Signature: _____ *Date:* _____

Terms: Credit to be applied to account or refunded via original payment method within [X] days.