CREDIT NOTE

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

Date: _____
Credit # : _____
Reference Invoice: _____

Bill To:

[Client Name]
[Client Address]
[Contact Email]

Adjustment Reason:

[Reason for Credit / Service Error]

Description of Service Adjustment	Original Rate	Adjustment Qty	Credit Amount
[Service Title / Project Name]	$0.00	0	-$0.00
[Service Title / Project Name]	$0.00	0	-$0.00

Subtotal: -$0.00
Tax Adjustment: -$0.00

Total Credit: -$0.00

Notes:

This credit will be applied to your next billing cycle or outstanding balance. Please contact your account manager for any questions regarding this adjustment.