CREDIT NOTE

[Company Name]
[Street Address]
[City, State, Zip]
[Tax ID / VAT Number]

Credit Note #: [000000]
Date: [MM/DD/YYYY]
Original Invoice #: [INV-000]
Customer ID: [CUST-000]

BILL TO

[Client Name]
[Client Business Name]
[Client Address]
[City, State, Zip]

REASON FOR CREDIT

[e.g., Service Cancellation, Overcharge, Returned Item]

Description of Service/Adjustment	Qty	Unit Price	Total
[Service Description]	0	0.00	0.00
[Service Description]	0	0.00	0.00

Subtotal: 0.00
Tax ([0]%): 0.00
Total Credit: $0.00

NOTES

This credit note will be applied to your future invoices or refunded upon request. No action is required if currently applied to an outstanding balance.

Thank you for your continued business.