

CREDIT ADJUSTMENT

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

Adjustment #: _____
Date: _____
Original Invoice #: _____

Bill To:

Reason for Credit:

Return of Goods
Pricing Correction
Damaged Items
Other

| Description | Qty | Unit Price | Adjustment Total |
|-------------|-----|------------|------------------|
| | | | |
| | | | |
| | | | |
| | | | |

Subtotal: \$0.00
Tax: \$0.00

Total Credit: \$0.00

Notes: _____

Electronic Adjustment Authorization ID: _____