

# CREDIT NOTE

[Company Name]

[Street Address]

[City, State, Zip]

Date: \_\_\_\_\_

Credit #: \_\_\_\_\_

Original Invoice #: \_\_\_\_\_

---

## BILL TO

[Customer Name]

[Customer Address]

[Contact Details]

## ADJUSTMENT REASON

Return of Goods

Pricing Correction

Damaged Item

Other: \_\_\_\_\_

Description	Qty	Unit Price	Tax Rate	Total Credit

Subtotal: \$ \_\_\_\_\_

Tax Amount: \$ \_\_\_\_\_

Total Refund Amount: \$ \_\_\_\_\_

## NOTES / INSTRUCTIONS

---

---

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_