

CREDIT NOTE

[Company Name]

[Street Address]

[City, State, Zip]

[Tax ID / VAT Number]

Credit Number: _____

Date: _____

Original Invoice #: _____

Customer ID: _____

BILL TO

[Customer Name]

[Customer Address]

[City, State, Zip]

[Phone/Email]

ADJUSTMENT REASON

Returned Merchandise

Pricing Correction

Damaged Goods

Other: _____

Description	Qty	Unit Price	Total Credit

Subtotal: \$0.00

Tax Amount: \$0.00

Total Adjustment: \$0.00

NOTES

This credit adjustment will be applied to your account balance. Please contact the accounting department for questions regarding this memo.

Authorized Signature: _____ Date: _____