CREDIT NOTE

REFUND # [0000]
DATE: [DD/MM/YYYY]

[Company Name]
[Street Address]
[City, State, Zip]
[Phone Number]

CUSTOMER INFORMATION

[Customer Name]
[Customer Address]
[Email Address]
[Order ID Reference]

REFUND DETAILS

Original Invoice Date: [DD/MM/YYYY]
Return Authorization: [RMA #]
Refund Method: [Credit Card / Store Credit / Bank Transfer]
Reason: [Defective / Returned / Price Match]

ITEM DESCRIPTION	SERIAL NUMBER	QTY	UNIT PRICE	TOTAL
[Product Name / Model]	[S/N: 00000000]	1	$0.00	$0.00
[Product Name / Model]	[S/N: 00000000]	1	$0.00	$0.00

Subtotal $0.00
Tax (0%) $0.00
Restocking Fee -$0.00
Total Refund $0.00

Terms: This credit note serves as a refund for the electronics listed above. For store credit, this balance expires on [Date]. Please retain this document for your records.

Authorized Signature: ___________________________