

CREDIT RETURN INVOICE

Credit Memo #: _____
Date: _____
Original Invoice #: _____

MERCHANT / FROM:

Tax ID: _____

CUSTOMER / BILL TO:

Account #: _____

SKU / Item #	Description	Qty	Unit Price	Total Credit

Subtotal Credit: \$ _____

Restocking Fee (if applicable): (\$ _____)

Tax Adjustment: \$ _____

Total Credit Issued: \$ _____

REASON FOR RETURN:

AUTHORIZED SIGNATURE:

Note: This is a credit memorandum. Please apply this amount toward your next balance or contact accounts payable for a refund disbursement.