

CREDIT RETURN INVOICE

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

Credit Memo #: [000000]
Date: [MM/DD/YYYY]
Original Invoice #: [000000]

Bill To:
[Customer Name]
[Customer Address]
[City, State, Zip]
Return Reason:
[Defective / Wrong Item / Cancelled / Other]

SKU / Item #	Description	Qty	Unit Price	Total

Subtotal: \$0.00
Tax: \$0.00
Restocking Fee: (\$0.00)
Total Credit: \$0.00

Notes: [Additional details regarding refund method or shipping.]

Authorized Signature: _____ Date: _____