

CREDIT NOTE

[Supplier Company Name]
[Street Address]
[City, State, Zip]
[Tax ID / VAT Number]

Credit Note #: [000000]
Date: [DD/MM/YYYY]
Ref Invoice #: [000000]
Customer Account: [ACC-000]

BILL TO

[Customer Name]
[Customer Address]
[City, State, Zip]
[Tax ID / VAT Number]

REASON FOR CREDIT

[e.g., Returned Goods, Pricing Error, Damaged Items]

Description	Qty	Unit Price	Tax	Total
[Item Description]	[0]	[0.00]	[0.00]	[0.00]
[Item Description]	[0]	[0.00]	[0.00]	[0.00]

Subtotal: [0.00]
Tax Total: [0.00]
Total Credit: [0.00]

Note: This credit will be applied to your outstanding balance or future invoices. Please contact our accounts department for any queries.

[Supplier Website] | [Contact Email] | [Phone Number]