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

CREDIT NOTE

Recurring Series: [Reference ID]

Bill To:
[Client Name]
[Client Address]
[Client City, State, Zip]

Credit Number: [CR-0000]
Date: [Date]
Billing Cycle: [Month, Year]
Original Invoice: [INV-0000]

Description of Credit / Monthly Adjustment	Quantity	Unit Price	Total
[Service Credit Description - e.g., Monthly Service Discount]	[0]	[0.00]	[0.00]
[Volume Rebate / Recurring Adjustment]	[0]	[0.00]	[0.00]

Subtotal: [0.00]
Tax: [0.00]

Total Credit: [0.00]

Notes: This credit will be applied to your next monthly billing cycle automatically.

Authorized Signature: ___________________________