

# CREDIT NOTE

Company Name  
Street Address  
City, State, Zip  
Tax ID: 00-0000000

Credit Note #: \_\_\_\_\_  
Date: \_\_\_\_\_  
Reference Invoice: \_\_\_\_\_

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## BILL TO

Customer Name  
Client Address  
City, State, Zip  
Contact Number

Description of Reason/Items	Qty	Unit Price	Amount

Subtotal \$ 0.00  
Tax (0%) \$ 0.00

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**Total Credit \$ 0.00**

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Reason for Credit: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_