[Company Name]

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

CREDIT NOTE

Credit Number: [CR-0000]
Date: [MM/DD/YYYY]
Original Invoice: [#INV-0000]

Customer:

[Customer Name]
[Billing Address]
[City, State, Zip]
[Email Address]

Cancellation Details:

Subscription Plan: [Plan Name]
Cancellation Date: [MM/DD/YYYY]
Reason: [Refund/Cancellation]

Description	Service Period	Unit Price	Amount
Prorated Refund for Subscription Cancellation	[Start Date] - [End Date]	[0.00]	([0.00])
Adjusted Tax/VAT	-	-	([0.00])

Subtotal: ([0.00])
Tax: ([0.00])

Total Refund Credit: ([0.00])

Note: This credit has been applied to your original payment method. Please allow 5-10 business days for the transaction to appear on your statement.

If you have any questions regarding this credit, please contact [Support Email].