CREDIT INVOICE

Credit # : _____

Date : _____

Ref Invoice # : _____

FROM (SUPPLIER)

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

BILL TO (CUSTOMER)

[Customer Name]
[Street Address]
[City, State, Zip]
[Account Number]

SKU / Item ID	Description	Qty Returned	Unit Price	Reason Code	Total Credit

Subtotal: $ 0.00
Tax: $ 0.00
Restocking Fee: ($ 0.00)

Total Credit: $ 0.00

NOTES / AUTHORIZED SIGNATURE

Reason Codes: A=Damaged, B=Shortage, C=Incorrect Item, D=Price Adjustment

Warehouse Manager Signature