

CREDIT MEMO / ADJUSTMENT

[Company Name]
[Street Address]
[City, State, Zip]

Date: _____
Credit # : _____
Ref Invoice # : _____

BILL TO

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

REASON FOR ADJUSTMENT

- Returned Merchandise
- Pricing Correction
- Damaged Goods
- Other: _____

Item #	Description of Adjustment	Qty	Unit Price	Total Credit

Subtotal: \$ _____

Tax Adjustment: \$ _____

TOTAL CREDIT: \$ _____

Authorized Signature: _____

Notes: This credit will be applied to your account balance unless otherwise requested.