CREDIT NOTE

[Company Name]

C R #:	
Issue Date:	
Due Date:	

[LOGO]

From
[Company Name]
[Attn]
[Street Address]
[City, State, Zip]
[Phone]
[E-Mail]

To
[Client Name]
[Client ID]
[Street Address]
[City, State, Zip]
[Phone]
[E-Mail]

Date	Description	Qty	Unit Price	Tax Rate	Tax	Total

Notes:

Grand Total	
Paid	
Balance Due	