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| --- |
| **Date:** |

# CREDIT MEMO

 **Bill to: Ship to:**

|  |  |
| --- | --- |
| ADDRESS: | ADDRESS: |
| CITY:  | CITY:  |
| STATE/PROVINCE: ZIP/POSTAL CODE: | STATE/PROVINCE: ZIP/POSTAL CODE: |
| PHONE:EMAIL: | PHONE:EMAIL: |
| CUSTOMER ID/INVOICE NUMBER: | TERMS: |
| REASON FOR CREDIT: |
| APPROVED BY: DATE: |
| APPROVED BY: DATE: |
| P.O./ORDER # | DATE: | INTERNAL BILLING # |

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| **INVOICE** | **ITEM** | **QTY** | **DESCRIPTION** | **PRICE** | **TOTAL** |
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| **Total Amount of Credit** | **R** |