

# Credit Note

Partial Refund

## From:

Company Name  
Address Line 1  
Address Line 2  
City, State ZIP  
Phone: (000) 000-0000

## To:

Customer Name  
Customer Address Line 1  
Customer Address Line 2  
City, State ZIP  
Phone: (000) 000-0000

**Credit Note No:** CN-0001

**Date:** YYYY-MM-DD

**Original Invoice No:** INV-12345

**Invoice Date:** YYYY-MM-DD

## Credit Details

Description	Qty	Unit Price	Total
Item/Service Name	1	100.00	100.00
Partial Refund Adjustment	-	-	50.00

**Subtotal:** 150.00

**Tax:** 0.00

**Total Credit:** 150.00

## Reason for Credit

Partial refund due to overcharge/return/adjustment. (Describe details here.)

This credit note is issued as a partial refund against the referenced invoice.

Thank you.