

ADJUSTMENT STATEMENT

Statement No.	
Date	
Reference No.	

CUSTOMER INFORMATION

Customer Name

Account Number

Address

Email / Phone

ORIGINAL TRANSACTION DETAILS

Original Invoice #

Invoice Date

Payment Method

Refund Method

ITEM / CODE	DESCRIPTION OF ADJUSTMENT	QTY	UNIT PRICE	TOTAL CREDIT

REASON FOR ADJUSTMENT / REMARKS

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Subtotal Credit

Tax Adjustment

Other
Charges/Fees

Total Refund

AUTHORIZED SIGNATURE

CUSTOMER ACCEPTANCE SIGNATURE