

DEBIT NOTE

Debit Note No:

Date:

Customer ID:

DEBIT TO

REFERENCE INFORMATION

Original Invoice No:

Original Invoice Date:

Purchase Order No:

Adjustment Approved By:

Item No.	Description / Reason for Adjustment	Original Amt	Corrected Amt	Debit Adjustment

Subtotal

Tax Rate / VAT

Tax Amount

Total Debit Note

DETAILED EXPLANATION / COMMENTS

Authorized Signature

Date: _____

Customer Acceptance Signature

Date: _____