

DEBIT MEMO

Debit Memo No.	
Date	
Original Invoice No.	
Customer Account No.	

BILL TO

REASON CODE / CATEGORY

ITEM / CODE	DESCRIPTION OF ADJUSTMENT	QTY	UNIT PRICE	AMOUNT

Subtotal	
Tax Rate / Tax	
Total Debit Adjustment	

ADJUSTMENT REASON / REMARKS

Prepared By (Authorized Signature)

Approved By (Authorized Signature)