

DEBIT MEMO CLAIM FOR CREDIT

REGISTER NO. _____

DATE _____

Reason for Adjustment

- Price Adjustment
- Defective Merchandise
- Freight Adjustment
- Weight Adjustment
- Returned Merchandise
- Quality Adjustment
- Merchandise Shortage
- Damaged Merchandise
- Other

 We are debiting your account We are submitting claim for credit**COMMODITY** (as described on invoice)

P.O. No. _____

Invoice or
Reference No. _____
Date _____

Details of Complaint: (see reason checked above)

Customer Credited

Credit Number	Credit Date	Credit Amount	Total Amount of Claim \$ _____
Investigated By:	Approved By:		Cleared _____ Date _____ Credit No. _____ Amount _____

YELLOW COPY TO FILE
PINK COPY TO ACCOUNTING

FORM #62