



# REQUEST FOR CREDIT NOTE

Form. No. :


Issue No. :

Page 2 of 1

Effective Date :

Effective Date :

Section Code:					
Customer Name:	MR. NICHOLAS WAN	Invoice No.:	1522000021Z		
Customer ID:	06002126	Invoice Date:	30/06/2019		
Job/File Number:		P5-002123	Invoice Amount:	2.00	
Credit Note Amount (Please tick one of the box):	<input type="checkbox"/>	Full invoice amount			
	<input type="checkbox"/>	Partial (Reduction), RM			
Justification for Issuance of Credit Note (Please tick one of the box):					
<input type="checkbox"/>	Product returned	<input type="checkbox"/>	Contract terminated		
<input type="checkbox"/>	Wrong data entry	<input type="checkbox"/>	Wrong amount		
<input type="checkbox"/>	Others				
Refund Amount (Please tick one of the box):					
<input type="checkbox"/>	Full invoice amount	<input type="checkbox"/>	Partial (Reduction), RM		
Prepared by,		Verified by,			
Name:		Name:		MOHAMMAD SHAHARIN AHMAD LATIF	

	REQUEST FOR CREDIT NOTE	Form. No. :
		Issue No. :
		Page 2 of 1
		Effective Date :
		Effective Date :

Date:		Date:		25/06/2020
Recommended by,		Approved by, *Within current accounting period – HOD **Different accounting period – VP/Head of SBU/SUB,		
Name:		Name:		
Date:		Date:		
*If approver has been delegated, please follow accordingly				
** Please attach necessary documents; Invoice/DO/PO etc. to support this application				
Finance use only				
		Checked/Verified by,		
Received by:		Name:		
Received date:		Date:		
		Comment (if any):		