|  |  |
| --- | --- |
| **Credit memo document number** |  |
| **Date** |  |
| **Signed AR Clerk** |  |

|  |
| --- |
| Once you have completed all of the required sections on this form, you must forward the email version onto your departmental approver, who will then need to forward the email to [accounts.receivable@derbyshire.gov.uk](mailto:accounts.receivable@derbyshire.gov.uk)  **Please note this request should only be submitted when the original invoice has been sent to the customer. If the invoice has not been sent to the customer, please complete a reversal request form (MD31 form).  This request form is not to be used for bad (irrecoverable) debt write offs. Please use form MD32 to write off bad debt.**  **Please ensure sections 1-3 are completed.** For further help on completing this form, please see the guidance notes. |
|
|
|
|
|
|
|
|

**Section 1 – Requester Details**

|  |  |
| --- | --- |
| **Name** |  |
| **Department** |  |
| **Section** |  |
| **Extension** |  |
| **Email address** |  |
| **Reason for Credit Memo** |  |
| **Supporting Documents if available** | Yes/No |

**Section 2 – Credit Memo Information**

**Part A: Header**

|  |  |
| --- | --- |
| **Company Code** |  |
| **Customer Number** |  |
| **Customer Name** |  |
| **AR Invoice Number** |  |
| **Document Date** |  |
| **Reference** |  |
| **Gross Amount** |  |
| **Total Tax Amount** |  |
| **Tax Code** |  |
| **Invoice sent to customer?** | Yes/No |

**Part B: Line Item/s**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **G/L CODE** | **COST CENTRE or**  **PROFIT CENTRE or**  **WBS or**  **STATISTICAL INTERNAL ORDER or**  **PLANT MAINTENANCE ORDER** | **TEXT** | **NET AMOUNT** | **VAT RATE**  **AA = 20%**  **A2 = 5%**  **A0 = 0%**  **A9 = exempt**  **AN = outside the scope** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |
| --- | --- |
| **Do you require this credit memo to be sent to the customer?** | Yes/No |

**Section 3 – Approval**

|  |  |
| --- | --- |
| **Approved By** |  |
| **Position** |  |
| **Extension** |  |
| **E-mail address** |  |
| **Date** |  |

By approving this request for a credit memo, you are verifying any supporting documents.

|  |  |  |
| --- | --- | --- |
| **Guidance notes**  **Section 1 – Requestor Details** |  |  |
| **Name** | Enter the name of the person making the request | |
| **Department** | Enter the requester's department name i.e. CAYA, Adult Care, CACS, CRD, Chief Executives, Environmental Services | |
| **Section** | Enter the requester's section | |
| **Extension** | Enter the requester's telephone extension | |
| **Email address** | Enter the requester's email address | |
| **Reason for credit note** | Enter a full description for the reason why you require a credit memo to be created in SAP. E.g. 'Issued invoice to customer with the incorrect amount' | |
|
|
| **Supporting documents** | Please specify if you have supporting documents. If yes, please attach these to your request. E.g. a copy letter from the customer stating they have been incorrectly charged. | |
|  |  |  |
|  |  |  |
| **Section 2: credit memo information** | |  |
|  |  |  |
| **Part a: header** |  |  |
|  |  |  |
| **Company code** | Enter the company code |  |
| **Customer no.** | Enter the customer number | |
| **Customer name** | Enter the customer name |  |
| **Ar invoice no.** | Please enter the invoice number the credit memo relates to | |
| **Document date** | Enter the date of the original invoice | |
| **Reference** | Customer's purchase order number or reference | |
| **Gross amount** | Enter the gross amount of the credit memo (including tax if applicable) | |
| **Tax amount** | Enter the tax amount of the credit memo | |
| **Tax code** | Please enter one of the following tax codes: |  |
|  | A0 - Zero rated | |
|  | A1 - 17.5% Previous standard rate | |
|  | A2 - 5.00% Reduced rate | |
|  | A3 - Delivery of goods in EU | |
|  | A4 - Services within the EU | |
|  | A5 - 15.00% Previous standard rate | |
|  | A9 - Exempt from output | |
|  | AA - 20.0% Current standard rate | |
|  | AN - 0.0% Outside business scope | |
| Please note your vat code should match the vat rate used on the original invoice | | |
| **Invoice sent to customer?** | Please specify if the invoice has been sent to the customer | |
|  |  |  |
| **Part b: line item** |  |  |
|  |  |  |
| **G/l account** | Enter the G/L account the original invoice was posted to | |
| **Net amount** | Enter the net amount required | |
| **Tax code** | Enter the VAT code as per the original invoice | |
| **Text** | Enter the text you wish to be displayed on the credit note | |
| **Cost centre** | Enter the cost centre the original invoice was posted to | |
| **Internal order/plant maintenance order** | Enter the order number the original invoice was posted to | |
| **Profit centre** | Enter the profit centre the original invoice was posted to | |
| **Wbs** | Enter the WBS the original invoice was posted to | |
| Please expand as necessary to include additional coding lines | | |

|  |  |  |
| --- | --- | --- |
| **Section 3: approval** |  |  |
|  |  |  |
| **Approved by** | Enter the approver's name | |
| **Position** | Enter the approver's title or position | |
| **Extension** | Enter the telephone extension of the approver | |
| **E-mail address** | Enter the approver's e-mail address | |
| **Date** | Enter the date of departmental authorisation | |
| By approving this request for a credit memo you are verifying the supporting documents. | | |
|  |  |  |
| **If there is insufficient or incomplete data on the form, which prevents the AR team from creating a credit note in SAP, your request will be rejected. In the event of your request being rejected, you will be contacted by a member of the AR team and given the reasons for the rejection, after which you will then need to correct the form and re-submit, if applicable.** | | |

**Do you require this credit to be sent to the customer? Yes**  **No**