

Credit Request Form

St. Martin America Inc.

87 Schuylkill St, Cressona PA 17929



All customer accommodations or credits over \$250 must be submitted and approved before being confirmed with the customer. Once the form is approved, it must be remitted back to accounting for processing. All credits, unless otherwise notated herein, will be issued as a credit on account.

Representative :	Receipient of Credit
Customer:	Credit Amount (\$)
Order #/s :	Date:

Background Information:

Rationale for Credit Being Isusued;

Total Cost of the Credit:

Plan/What Needs to Happen:

Special Circumstances:

Have credits been issued in the past for this customer?	YES	NO
If yes, what were they?		

Representative Signature	
Employee's signature:	Date:

INTERNAL USE

Accommodation request is:	Approved	Denied	Modified
If modified, describe modification. If denied, give rationale.		Manager Signature	

Date Accommodation Form Received:
Date Processed by Accounting: