

INVOICE

Date:

Invoice #:

Bill To:

Ship To:

SALESPERSON	SHIP VIA	SHIP DATE	TERMS	DUE DATE

Item #	Description	Quantity	Unit Price	Total

Tax Rate:	
Sales Tax:	

Subtotal: _____
Shipping: _____
Other: _____
TOTAL: _____

If you have any concerns regarding this invoice, please contact

THANK YOU FOR YOUR BUSINESS!