|  |  |
| --- | --- |
| **INVOICE** | Invoice: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |

|  |  |
| --- | --- |
| To:  [Name]  [Company Name]  [Street Address]  [City, ST ZIP Code]  [Phone Number] | Ship To:  [Name]  [Company Name]  [Street Address]  [City, ST ZIP Code]  [Phone Number] |
|  | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| SALESPERSON | P.O. NUMBER | REQUISITIONER | SHIPPED | F.O.B. | TERMS |
|  |  |  |  |  |  |
|  |  |  |  |  | Due on receipt |

|  |  |  |  |
| --- | --- | --- | --- |
| QUANTITY | DESCRIPTION | UNIT PRICE | TOTAL |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Make all checks payable to [Company Name].  If you have any questions concerning this invoice,  contact: Pc at [Phone Number]. | | SUBTOTAL |  |
| SALES TAX |  |
| HANDLING |  |
| TOTAL due |  |

Thank you for your business!