## INVOICE

		<u>_</u> 		
Invoice Num				
Date:				
Order Num				
Terms				
	1	_ 		
Company				
Address				
State, Province				
Zip/Postal Code				
Phone				
Fax				
Contact Name				
Item	 Details	Quantity	Unit Price	Amount
		<u></u>	<u> </u> 	] 
<u> </u>			<u> </u>	<u> </u>
<u> </u>		<u></u>	<u> </u>	<u> </u>
<u></u>				
Comments:		I	Sub-Total	l
				<u> </u>
			Grand Total	
			Internal Use Only	
			Amount (\$)	
			Check Num	
			1	