**PRO-FORMA INVOICE**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| [Street Address] [City, ST ZIP Code] [Phone] [Fax] [E-mail] | **To**:  [Name] [Company Name]  [Street Address]  [City, ST ZIP Code] |

**Invoice #: [100] Date: [00/00/000] Customer ID: [ABC12345]**

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| --- | --- | --- | --- |
| **QUANTITY** | **DESCRIPTION** | **UNIT PRICE** | **LINE TOTAL** |
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|  |  | **Sub Total** |  |
| **Sales Tax** |  |
| **Total** |  |