INVOICE

YOUR COMPANY NAME
STREET ADDRESS
CITY, STATE ZIP CODE
PHONE NUMBER

DATE	INVOICE NO.	PAGE

ACCOUNT NO.	SALESMAN NO.

BILL TO

SHIP TO

DESCRIPTION	ORDER DATE	CUSTOMER P.O. NO.	SALES ORDER	SHIPPING INSTRUCTIONS

QTY	U/M	PART #	DESCRIPTION	PRICE	DISC %	AMOUNT

REMIT PAYMENT TO:

YOUR COMPANY NAME
STREET ADDRESS
CITY, STATE ZIP CODE

TERMS:

SALE AMOUNT	
DISCOUNT	
TAX	
FREIGHT	
SUBTOTAL	
DEPOSIT	
TOTAL DUE	