

[Your Company Name]

[Your Company Name]

[Address]

[Town, County, Postal Code]

[Phone (0)1234 567890 Fax (0)1234 567890]

INVOICE

[Invoice No. 1234]

[Date: 10 October, 2011]

[Billing Address]

[Name]

[Company]

[Address]

[Town, County, Postal Code]

[Phone]

[Delivery Address]

[Name]

[Company]

[Address]

[Town, County, Postal Code]

[Phone]

Comments or special instructions:

SALVAGE	F.O. DUNN	DATE	DATE	F.O. DUNN	DATE

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT

QUANTITY

UNIT PRICE

AMOUNT

DATE

Make all cheques payable to [Your Company Name]

If you have any questions concerning this invoice, contact [Name, Phone Number, E-Mail]

***** THIS IS ONE FROM DUNN, INC *****