Title				INVO	NCE
Mesite - Mill Yo: Name Address	n. Pip Code - e , Zip Code			DATE: INVOICE #:	20 May-16
	PAYMENT TERMS	DUF DATE	1	LEAD TIME	
10 1	DESCRIPT	inv	HOURS	RATE	AMOUNT
					\$0.00 \$0.00 \$0.00

Subtotal Tex Total

Make all checks payable to "Your Name": If you have any questions please call or email us. There you for your business.