Date

Invoice No. 1234

To Name Street Address City, ST ZIP Code

Ship To Same as recipient

Instructions Delivery instructions

Total	Unit Price	Description	Quantity
	4 1		4
		Subtotal	
	-		
		Sales Tax	
		Shipping & Handling	
		Total Due	

Due upon receipt

Thank you for your business!

Company

Tel Telephone Fax Fax Street Address City, ST ZtP Website Email

