|  |  |
| --- | --- |
| {company} | INVOICE |
| {address}  {City}, {sate}, {zip code}  Phone: {phone} | Invoice #{number}Date: {date} |
| To: {recipient name}  {recipient company}  {recipient address}  {recipient city}, {recipient state},{recipient zip code}  Phone: {recipient phone} | Ship To: {recipient name}  {recipient company}  {recipient address}  {recipient city}, {recipient state},{recipient zip code}  Phone: {recipient phone} |

|  |
| --- |
| Comments or special instructions: {instructions} |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | SALESPERSON | P.O. NUMBER | REQUISITIONER | SHIPPED VIA | F.O.B. POINT | TERMS | | {salesperson} | {p.o number} | {requisitioner} | {shipped via} |  | {terms} | |

| QUANTITY | DESCRIPTION | UNIT PRICE | TOTAL |
| --- | --- | --- | --- |
| {#products}{number} | {#products}{label} | {#products}{value} | {#products}{value} |
|  |  |  |  |
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|  |  |  |
| --- | --- | --- |
|  | SUBTOTAL | {subtotal} |
|  | SALES TAX | {tax} |
| {Signature} | SHIPPING & HANDLING | {shipping} |
|  | TOTAL due | {total due} amount} |

Make all checks payable to {company name}

If you have any questions concerning this invoice, contact [Name, phone, email]

Thank you for your business!