Your Company Name

Your Company Slogan

Address City, State ZIP

Phone 123.456.7890 Fax 123.456.7891

INVOICE

DATE: 01/01/2000 INVOICE # 100

TOTAL S

12,955.38

Bill To: Ship To: Name Name Company Company Address Address City, State ZIP City, State ZIP Phone Phone

Comments or Special Instructions: None

SALESPERSON	P.O. NUMBER	SHIPDATE	SHIPVIA	F.O.B. POINT	TERMS	
					Due on receipt	

QUANTITY	DESCRIPTION		UNIT PRICE		AMOUNT	
65		qt	5	283.53	S	11,929.45
				SUBTOTAL	5	11,929.45
					-	
				TAX RATE		8,60%
			5	SALESTAX		1,02593
		SHIP	PING &	HANDLING		