[Company Name]

[Your Company Slogan]

INVOICE

[Street Address]
[City, ST ZIP Code]
Phone: [Phone] Fax: [Fax]

INVOICE #[100]
DATE: [DATE]

TO: SHIP TO: [Recipient Name] [Recipient Name] [Company Name] [Company Name [Street Address]

[Street Address][Street Address][City, ST ZIP Code][City, ST ZIP Code]Phone: [Phone]Phone: [Phone]

COMMENTS OR SPECIAL INSTRUCTIONS:

[To get started right away, just tap any placeholder text (such as this) and start typing to replace it with your own.]

SALESPERSON	P.O. NUMBER	REQUISITIONER	SHIPPED VIA	F.O.B. POINT	TERMS
					[Due on receipt]

QUANTITY	DESCRIPTION		UNIT PRICE	TOTAL
			SUBTOTAL	
			SALES TAX	
		SHIPPING	G & HANDLING	
TOTAL DUE				

Make all checks payable to [Company Name]
If you have any questions concerning this invoice, contact [Name, phone, email]

THANK YOU FOR YOUR BUSINESS!