

Cypefinland

Company Address
Phone [Phone Number]
Fax Fax Number

INVOICE

INVOICE#: 100
DATE: 2021-03-02

BILLED TO:

Name
Company Name
Street Address
City, ST ZIP Code
Phone Number

SHIP TO:

Name
Company Name
Street Address
City, ST ZIP Code
Phone Number

COMMENTS OR SPECIAL INSTRUCTIONS:

YOUR COMMENTS

S/N	DESCRIPTION	UNIT PRICE	QUANTITY	TOTAL
1	Book	GMD50	2	GMD100
2	Phone	GMD100	3	GMD300
3	Pencils	GMD25	6	GMD150
4	School bag	GMD600	1	GMD600
SUBTOTAL				GMD11150
SALES TAX				GMD50
SHIPPING & HANDLING				
TOTAL DUE				GMD11200

Make all checks payable to Company Name.

If you have any questions concerning this invoice, contact: Your Name at [Phone Number] or E-mail Address.

THANK YOU FOR YOUR BUSINESS!