

Your Logo

<Your Company Name>
<123 Street Address>
<City, State, Zip/Post Code>
<Phone Number>
<Email Address>

BILL TO

<Contact Name>
<Client Company Name>
<Address>
<Phone>
<Email>

INVOICE

INVOICE DATE

INVOICE NO.

CUSTOMER NO.

SHIP TO

<Name / Dept>
<Client Company Name>
<Address>
<Phone>

| DESCRIPTION | QTY | UNIT PRICE | TOTAL |
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Remarks / Payment Instructions:

SUBTOTAL

DISCOUNT

SUBTOTAL LESS DISCOUNT

TAX RATE

TOTAL TAX

SHIPPING/HANDLING

Balance Due \$ -