|  |  |
| --- | --- |
| **Your company Name** Phone Fax | **INVOICE** |
| INVOICE #  DATE: MARCH 16, 2018 |

|  |  |
| --- | --- |
| **TO:** | **SHIP TO:** |
| **COMMENTS OR SPECIAL INSTRUCTIONS:** | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **SALESPERSON** | **P.O. NUMBER** | **REQUISITIONER** | **SHIPPED VIA** | **F.O.B. POINT** | **TERMS** |
|  |  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **QUANTITY** | **DESCRIPTION** | | **UNIT PRICE** | **TOTAL** |
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|  |  | |  |  |
| Make all checks payable to - Payment is due within 30 days  If you have any questions concerning this invoice, contact | | SUBTOTAL | |  |
| SALES TAX | |  |
| SHIPPING & HANDLING | |  |
| TOTAL DUE | |  |



Detach and return with payment

**REMITTANCE**

|  |  |
| --- | --- |
| Invoice # |  |
| Customer ID |  |
| Date |  |
| Amount Enclosed |  |