

PRODUCE INVOICE

Company Name
Street Address
City, State, Zip
Phone / Email

Invoice #: _____

Date: _____

BILL TO:

SHIP TO:

Item #	Description / Variety	Grade/Size	Qty (pkgs)	Unit Price	Total

Item #	Description / Variety	Grade/Size	Qty (pkgs)	Unit Price	Total

Subtotal: \$ _____
 Delivery/Freight: \$ _____

TOTAL DUE: \$ _____

Notes / Storage Requirements:

Perishable goods. Please inspect upon delivery. Terms: Net _____ days.