

EQUIPMENT INVOICE

Laboratory Inventory Systems

INVOICE #
DATE

VENDOR / SUPPLIER
DELIVERY DESTINATION (LAB/DEPT)

Model/ID	Equipment Description	Qty	Unit Price	Amount

NOTES / WARRANTY DETAILS

Subtotal: \$ _____
Tax: \$ _____
Shipping: \$ _____
Total: \$ _____

RECEIVER SIGNATURE
INVENTORY ASSET TAG CODE