

# INVOICE

[Company Name]

[Street Address]

[City, State, Zip]

Date: \_\_\_\_\_

Invoice #: \_\_\_\_\_

PO #: \_\_\_\_\_

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## BILL TO:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## SHIP TO:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Linen Type / Color	GSM/Weight	Roll/Bolt ID	Volume (Yds/Mtrs)	Unit Price	Total

Subtotal: \$ \_\_\_\_\_

Shipping/Freight: \$ \_\_\_\_\_

TOTAL DUE: \$ \_\_\_\_\_

Notes / Fabric Composition: \_\_\_\_\_

Payment Terms: Net [ ] Days. Please make checks payable to [Company Name].