

BAKERY SALES INVOICE

[Bakery Name]
[Street Address]
[City, State, Zip]
[Phone Number]

Invoice #: _____
Date: _____
Order Type: Delivery Pickup

Bill To: [Customer Name] [Company Name] [Customer Address] [Phone/Email]
Ship To: [Delivery Address] [Delivery Date] [Special Instructions]

Item Description	Unit (kg/dz/ea)	Qty	Unit Price	Total

Subtotal: \$0.00
Tax: \$0.00
Delivery Fee: \$0.00
Total Due: \$0.00

Thank you for your business!

Terms: Payment is due within [X] days. Please make checks payable to [Bakery Name].