

PURCHASE INVOICE

[Enterprise Name]
[Street Address]
[City, State, Zip]

Invoice #: _____
Date: _____

VENDOR / REMIT TO:

SHIP TO:

Purchase Order #: _____
Payment Terms: _____
GL Account Code: _____
Cost Center: _____

Description	Quantity	Unit Price	Amount

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Subtotal: \$0.00

Tax: \$0.00

Shipping: \$0.00

Total Due: \$0.00

Internal Authorization:

Approved By (Signature)

Date

Note: Please include the Purchase Order number on all correspondence and payment stubs.