THE GREEN PANTRY

Artisanal & Organic Provisions

INVOICE NUMBER
#INV-_____

DATE
____ / ____ / 20__

BILL TO

_____
_____
_____

STORE LOCATION
123 Orchard Lane
Greenwich, CT 06830
hello@thegreenpantry.com

Item Description	Qty	Unit Price	Total
_____	___	$___	$_____
_____	___	$___	$_____
_____	___	$___	$_____
_____	___	$___	$_____

Subtotal $_____
Tax (___%) $_____
Total $_____

Thank you for supporting sustainable, local farming.

Return Policy: Fresh produce returns accepted within 24 hours with receipt.