CSA INVOICE

[Farm Name]
[Street Address]
[City, State, Zip]
[Email/Phone]

Invoice #: _____

Date: _____

BILL TO:

_____
_____
_____

SEASON / TERMS:

Season: _____
Due Date: _____

Description (Share Type / Add-on)	Quantity	Unit Price	Total

Subtotal: $_____

Tax: $_____

Grand Total: $_____

Pickup Location: _____

Payment Instructions: [Check/Online/Cash instructions]

Thank you for supporting local agriculture!