SALES INVOICE

[Store Name]
[Store Address]
[Phone/Email]

Invoice #: _____
Date: _____

BILL TO:
[Customer Name]
[Customer Address]
[Contact Number]

PAYMENT TERMS:
[Cash/Credit/Online]

Part No.	Description	Qty	Unit Price	Total

Subtotal: $0.00
Tax (%): $0.00

Grand Total: $0.00

Notes: All electronic components are subject to [X] days return policy if original packaging is unopened. Warranty as per manufacturer terms.

Thank you for your business!