

INVOICE

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

Invoice #: _____

Date: _____

PO #: _____

BILL TO:

SHIP TO:

SKU / Item #	Description	Quantity	Unit Price	Total

SKU / Item #	Description	Quantity	Unit Price	Total

Subtotal: \$ _____
Tax: \$ _____
Shipping: \$ _____

Total Due: \$ _____

Payment Terms: [Net 30 / Due on Receipt]

Notes: _____

Thank you for your business!