

INVOICE

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

Invoice #: [00000]
Date: [YYYY-MM-DD]
PO Number: [PO-000]

BILL TO

[Customer Name]
[Customer Address]
[Tax ID / VAT]

SHIP TO / JOB SITE

[Shipping Name]
[Shipping Address]
[Contact Phone]

Part Number / Description	Layers	Quantity	Unit Price	Total
[FPCB Part Name/Rev] Material: [Polyimide/Copper thickness]	[1/2/4]	[0]	\$0.00	\$0.00
NRE / Tooling Charges (Stencils/Fixtures)	-	[1]	\$0.00	\$0.00
Electrical Testing / Certification	-	[1]	\$0.00	\$0.00

Subtotal: \$0.00
Shipping & Handling: \$0.00
Tax: \$0.00

Total Amount Due: \$0.00

TERMS & NOTES

Payment Terms: *[Net 30]*

Lead Time: *[X Weeks]*

RoHS Compliance: *[Yes/No]*