

INVOICE

Bill to:

Ship to (if different)

Invoice Date	Invoice #	P.O. #	Vendor (our Number)	Date Shipped	Terms

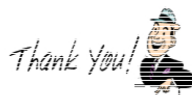
Line Item	Part No.	Qty	Description	Hours	Rate	Amount

Subtotal:

Tax:

Shipping & Handling:

Total Due:



Thank you for your prompt payment! **Payment is due** _____.