



Your Company Name

Street Address
City, ST ZIP Code
Phone Number, Web Address, etc.

INVOICE

DATE:
INVOICE #:

Bill To:

Ship To:

P.O. #	Sales Rep. Name	Ship Date	Ship Via	Terms	Due Date

Product ID	Description	Quantity	Unit Price	Line Total

SUBTOTAL		-
PST	8.00%	-
GST	6.00%	-
SHIPPING & HANDLING		-
TOTAL		-
PAID		-
TOTAL DUE		-

Notes:

THANK YOU FOR YOUR BUSINESS!