



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 8.000%	-
GST 6.000%	-
SHIPPING & HANDLING	-
TOTAL	-
PAID	-
TOTAL DUE	-

NOTES:

THANK YOU FOR YOUR BUSINESS!