

**COMPANY NAME**  
**123 Anystreet**  
**Your City, USA 12345**  
**Phone (123) 456-7890**

<b>INVOICE NUMBER</b>  _____
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Ordered By \_\_\_\_\_

Phone \_\_\_\_\_

Date		P.O. #		Terms:			Ship Via:		
QUANTITY		DESCRIPTION				UNIT PRICE		AMOUNT	
CASH	CHECK#	VISA	MC	CHARGE	RESALE/TAX EXEMPT#	<b>Subtotal</b>			
Signature _____  Date _____						<b>Tax</b>			
						<b>Shipping Charge</b>			
						<b>TOTAL</b>			
						<b>Deposit</b>			
						<b>BALANCE DUE</b>			

PLEASE PAY FROM INVOICE