office printable .com

INVOICE

YOUR LOGO

FROM

Business name

Street address

City, state, ZIP

Phone

Email / website

INVOICE NO.	INVOICE DATE	DUE DATE	PO NUMBER	PAYMENT TERMS

BILL TO

Name / company

Street address

City, state, ZIP

Email

SHIP TO

Name / company

Street address

City, state, ZIP

Phone

Item	Description	Qty	Unit price	Amount

Subtotal	
Discount	
Tax rate (%)	
Sales tax	
Shipping	
Total	
Amount paid	
Balance due	

PAYMENT INSTRUCTIONS

Ways to pay

Bank / account

Pay online

Checks payable to

NOTES

Thank you for your order. Please write the invoice number on your check or payment.