INVOICE

NO:

DATE:

PAGE:

BILL TO: **SHIP TO:**

PURCHASE ORDER NO:				SALESPERSON:		TERRITORY:
OUR ORDER NO:				DATE OF ORDER		TERMS:
CUSTOMER ACCOUNT NO:				SHIP VIA:		F.O.B.:

QTY. ORDERED	QTY. SHIPPED	QTY. B.O.	STOCK NUMBER	DESCRIPTION	PRICE/PER	TOTAL

SUB-TOTAL:

SALES TAX:

FREIGHT:

PREPAYMENT:

CREDIT:

THANK YOU

TOTAL

Form 2052, Printed by: