Date: [Enter a date] Invoice # [100]

[Company Name]

[Street Address]

[City, ST ZIP Code]

Customer ID [ABC12345]

Thank you for your business!

[Name]

[Phone]

## SALES ORDER

Ship To

[Your Company Name]
[Street Address]
[City, ST ZIP Code]
[Phone]
Fax [000.000.0000]
[e-mail]

YOUR LOGO

HERE

[Your company slogan]

Salesperson	Job	Shipping Method	Shipping Terms	Delivery Date	Payment Terms	Due Date
					Due on receipt	

[Name]

[Phone]

[Company Name]

[Street Address]

[City, ST ZIP Code]

Customer ID [ABC12345]

То

	Unit Price	Description	Item #	Qty
	otal Discount			
Subtotal				
Sales Tax				
Total				