



Clothing Store 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	SIZE	QUANTITY	UNIT PRICE	LINE TOTAL

	SUBTOTAL	-
PST	8.00%	-
GST	6.00%	-
	SHIPPING & HANDLING	-
	TOTAL	-
	PAID	-
	TOTAL DUE	-

NOTES:

THANK YOU FOR YOUR BUSINESS!