

INVOICE AB 000001

COMPANY NAME

ADDRESS
ADDRESS
ADDRESS

DATE	YOUR ORDER NO.
SALESPERSON	OUR ORDER NO.
SHIPPED TO	
VIA	

SOLD TO

- _____
- _____
- _____

QTY. ORDERED	B/O	QTY. SHIPPED	DESCRIPTION	UNIT PRICE	UNIT	AMOUNT
<h1>PROOF</h1>						

TERMS

TOTAL PURCHASES

G.S.T./H.S.T.

P.S.T.

TOTAL