

# Commercial Invoice

**Company Name**

**Address**

**Phone:**

**Fax:**

**email:**

**website:**

**Bill To:**

**Phone:**

**Invoice #:**

**Address:**

**Fax:**

**Invoice Date:**

**Email:**

**Contact:**

| Date | Item # | Description | Qty | Unit Price | Discount | Total |
|------|--------|-------------|-----|------------|----------|-------|
|      |        |             |     |            |          |       |
|      |        |             |     |            |          |       |
|      |        |             |     |            |          |       |

**Invoice Subtotal**

**Tax Rate**

**Sales Tax**

**Shipping**

**Deposit Received**

**Total**

MAKE ALL CHECKS PAYABLE TO COMPANY NAME.

TOTAL DUE IN 10 DAYS. OVERDUE ACCOUNTS ARE SUBJECT TO AN INTEREST CHARGE OF 2% PER MONTH.

## Customers

| Company Name | Contact Name | Address | Address 2 | City | State | ZIP Code | Phone | Email | Fax |
|--------------|--------------|---------|-----------|------|-------|----------|-------|-------|-----|
|              |              |         |           |      |       |          |       |       |     |

