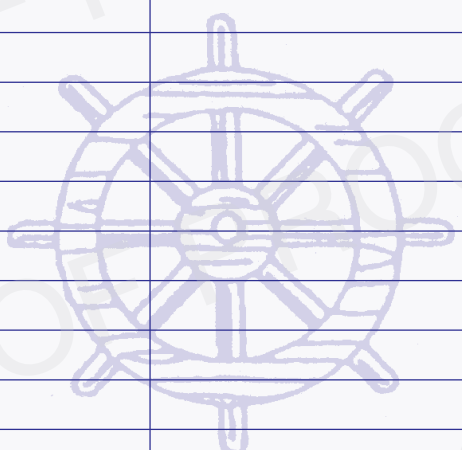


YOUR COMPANY NAME

Address
 CITY STATE ZIP
 Phone And Fax
 Adverising Line

CUSTOMER'S ORDER NO.		PHONE			DATE		
NAME							
ADDRESS							
CITY		STATE			ZIP		
SOLD BY	CASH	C.O.D.	CHARGE	ON ACCT.	MDS. RETD.	PAID OUT	REPAIR
QTY.	PART NO.	DESCRIPTION				PRICE	AMOUNT
							
123456		RECEIVED BY:				TAX	
						TOTAL	

Thank You!