

YOUR COMPANY NAME

Address
City State Zip
Phone and Fax
Advertising Line

Customer's Order No.					Date				20	
Sold to										
Address										Phone
MDSE. SOLD			MDSE. RET'D				RECD. ON ACCT. - NOTE	MISC'L	PAID OUT	
CASH	CHARGE		CASH	CREDIT						
QUAN.	NUMBER	ARTICLES					PRICE	AMOUNT		
							TAX			
							TOTAL			
All claims and returned goods MUST be accompanied by this bill.										
123456			Salesman				Received By			



Thank You