[Company Name]

[Company Slogan] [web address]

PACKING SLIP

DATE CUSTOMERID 1/26/2010 [12345]

[Stress Address] [City, ST_ZIP]

Phone: [000-000-0000] Fax: [000-000-0000]

BILL TO:

[Name] [Company Name] [Stress Address] [City, ST_ZIP] [Phone]

SHIP TO:

[Name] [Company Name] [Stress Address] [City, ST ZIP]

[Phone]

ORDER DATE	ORDER#	PURCHASE ORDER #	CUSTOMER CONTACT
1/26/2010	[123456]	[123456]	Purchasing Dept.

ITEM#		DESCRIPTION		ORDER QTY	SHIP QTY
[23423423]	Product XYZ			15	13
[45645645]	Product ABC			1	1
			TOTAL:	16	14

OTAL:	16	14

Comme	nts:
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Backordered it ems will ship as they become available