

BLANK INVOICE TEMPLATE

YOUR LOGO

INVOICE

Company Name  
123 Main Street  
Hamilton, OH 44416  
(321) 456-7890  
Email Address  
Point of Contact

DATE

INVOICE NO.

CUSTOMER ID

| BILL TO            | SHIP TO            |
|--------------------|--------------------|
| ATTN: Name / Dept  | ATTN: Name / Dept  |
| Company Name       | Company Name       |
| 123 Main Street    | 123 Main Street    |
| Hamilton, OH 44416 | Hamilton, OH 44416 |
| (321) 456-7890     | (321) 456-7890     |
| Email Address      |                    |

TERMS

| DESCRIPTION | TOTAL |
|-------------|-------|
|             |       |
|             |       |
|             |       |
|             |       |
|             |       |
|             |       |
|             |       |

Remarks / Instructions:

SUBTOTAL

enter total amountDISCOUNT

SUBTOTAL LESS DISCOUNT

enter percentageTAX RATE

TOTAL TAX

SHIPPING/HANDLING

OTHER

TOTAL

Please make check payable to Your Company Name.

THANK YOU

For questions concerning this invoice, please contact  
Name, (321) 456-7890, Email Address  
www.yourwebaddress.com