

SAMPLE INVOICE



	SAMPLE VENDOR INVOICE							
	Invoice # Date:						-	· INVOICE NUMBER AND DATE
	Vendor:			Sold To:				
VENDOR NAME AND ADDRESS →							-	CUSTOMER NAME AND ADDRESS
	Qty.	Model #	Item I	Description	Make	Cost		
TEMIZED LIST OF EQUIPMENT MAKE AND MODEL, UNIT PRICE, AND QUANTITY								
	Amount Paid						—	PAYMENT STATUS
Total Due							-	TOTAL PAYMENT AMOUNT

Invoice Requirements:

- Product details
 - Manufacturer
 - o Model Number
 - o Serial Number
 - o Quantity purchased
- Item and total costIndication of payment

Note: Manufacturer data sheet must match information on invoice.