Invoice

TAX DATE	INVOICE NO

INVOICE TO:	SHIP TO:

P.O. NUMBER	TERMS	REP	SHIP	VIA	F.O.B.	PROJECT

QUANTITY	ITEM CODE	DESCRIPTION	PRICE EACH	NET AMOUNT	VAT%

VAT%	VAT AMOUNT	VAT%	VAT AMOUNT	
				SUBTOTAL
				VAT
				TOTAL

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