[Add your Company Logo here]

[Company Name]

DELIVERY INVOICE

[Company Name]
[Street Address]
[City, State, Country]
[ZIP Code]
[E-mail]
[Phone]

Invoice #:	
Invoice Date:	
Due Date:	
Tax Rate:	

Bill to

[Name]
[Street Address]
[City, State, Country]
[ZIP Code]

S No	Description	Amount

Payment is due in [#] days	Subtotal	
Comments or Special Instructions:	Discount	
	Tax	
	TOTAL	