			INVOICE			01001
	You	r Company Name Your Adress Line 1	ORDER NO.		INVOICE DATE	
	Your Adress Line 2		DATE SHIPPED		SHIPPED VIA	1
		Your Phone/Other	NO. PCS.	WT.	FOB	TERMS
SOLD TO			SHIPPED TO			
QUANTITY	UNIT	DESCRIPTION			UNIT PRICE	TOTAL PRIC
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