Company Name

INVOICE #[100]

Customer Account #: ____

Sales Order #: ____

Quote #: _____

Invoice Date: November 16, 2021

Supplier Corporate Address:	Supplier Remit Address:			
Company Name	Company Name			
Street Address	Street Address			
City, State, Zip	City, State, Zip			
Phone: (123) 456-7890 Fax: (234) 567-8901	Phone: (123) 456-7890 Fax: (234) 567-8901			
SAP Vendor #: 125435-123	SAP Vendor #: 125435-123			
	Make all checks payable to "Company Name"			
Bill To Address:	Ship To Address:			
Agency/Department Name and Facility/Institution	Agency/Department Name and Facility/Institution			
Commonwealth of Pennsylvania	Commonwealth of Pennsylvania			
PO Box	PO Box			
City, PA, Zip	City, PA, Zip			
Tel #:	Tel #:			
Comments or special instructions:				

SAP P.O. Number	Procurement Contact	Shipped via	F.O.B. Point	Terms
				Net xx days Date of invoice receipt

SAP P.O. Line Item #	SAP Material #	Description	Quantity Shipped	Unit of Measure	Unit Price	Total Price
		1	1	1	TOTAL DUE	

If you have any questions concerning this invoice, contact:				
Name:	Email:			
Tel:	Fax:			

Notes:

SAP is our enterprise software system. To find out your SAP vendor numbers, please contact your procurement representative. If applicable, shipping and handling must be a line item on the **purchase order and invoice**. If applicable, additional documentation will be attached to this invoice as required.

If applicable, provide service dates within the comments and special instructions.

Recommendations when invoicing (not part of invoice template)

- 1. Do no submit invoices on colored paper (yellow, green, blue, etc.). Please submit on only black and white. Colored paper creates issues when they are imaged and delay the payment process.
- 2. Please insure that invoices are legible. If paper invoices are 'barely' legible, scanning the invoices make them less so and delay the payment process.