

Rayzor Special Photography



Invoice

Company _____

Address _____

City _____

State/Province _____ Zip/Postal Code _____

Country _____

Invoice Number _____

Invoice Date _____

Phone Number _____

Fax Number _____

Contact Name _____

Photo No.	Description	Quantity	Unit Price	Amount
Internal Use Only		Total		
Date Received _____	Amount Received _____	GST @		
Thank You!		Shipping Charge		
We appreciate your business.		Grand Total		