

Sales Order Entry Form

Order No.

Order Date

Customer Name

Customer Contact

Sales Rep

Billing Address

Shipping Address

#	Product / Service	SKU	Quantity	Unit Price	Discount	Total
1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Subtotal						<input type="text"/>
Tax						<input type="text"/>
Total Amount						<input type="text"/>

Notes / Instructions

Order Status

Select 