

Purchase Invoice

Invoice Number

Date

Reference

Supplier Name

Supplier Contact

Supplier Address

#	Item Description	SKU/Code	Qty	Unit Price	Discount
<input type="text" value="1"/>	<input type="text" value="Item name"/>	<input type="text" value="Code"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="2"/>	<input type="text" value="Item name"/>	<input type="text" value="Code"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="3"/>	<input type="text" value="Item name"/>	<input type="text" value="Code"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
					Subtotal
					Tax (%)
					Additional Charges
					Grand Total

Notes / Terms

Prepared By

Approved By

Thank you for your business.