

YOUR COMPANY NAME

ADDRESS

CITY, STATE, ZIP CODE

ADVERTISING LINE

Customer's
Order No. _____ Date _____

Name _____

Address _____

SOLD BY	CASH	C. O. D.	CHARGE	ON ACCT.	MDSE. RETD.	PAID OUT	LAYAWAY

ARTICLE	STOCK NO.	AMOUNT
SPECIAL INSTRUCTIONS	TAX	
	TOTAL	
	DEPOSIT	
	BALANCE	

0001001

Rec'd by _____

All claims and returned goods MUST be accompanied by this bill.