

# Amyuni Techonolgies

# INVOICE

5165 Sherbrooke West, Suite 200  
Montréal, Québec  
Phone 514-868-9226

**DATE:** 01/01/2000  
**INVOICE #** 100

**Bill To:**

**Ship To:**

**Comments or Special Instructions:** None

SALESPERSON	P.O. NUMBER	SHIP DATE	SHIP VIA	F.O.B. POINT	TERMS
					Due on receipt

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT

SUBTOTAL	\$	-
TAX RATE		
SALES TAX		-
SHIPPING & HANDLING		-
<b>TOTAL</b>	<b>\$</b>	

Make all checks payable to **Your Company Name**

If you have any questions concerning this invoice, contact Name, Phone Number, Email

**THANK YOU FOR YOUR BUSINESS!**