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| --- | --- |
|  | INVOICE |
| Company Name | **INVOICE #**Date:  |
| Xxxx Main RoadNowhere, QC H0H 0H0Phone #(111) 111-1111Email address |  |

|  |  |  |
| --- | --- | --- |
| To | Mrs./Mr. xxxxMcGill UniversityBuilding and Addressxxxx(111) 111-1111 |  |

|  |  |  |  |
| --- | --- | --- | --- |
| salesperson | Purchase Order Number | payment terms | due date |
|  |  | NET 45 |  |

|  |  |  |  |
| --- | --- | --- | --- |
| qty | description | unit price | line total |
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|  | QST #:GST #: |  |  |
|  |  |  |  |
|  | Subtotal |  |
| Please make check payable to: **Company Name** | Sales Tax |  |
|  | Total |  |