

SILENT AUCTION INVOICE

FROM

COMPANY: _____

ATTN: _____

ADDRESS: _____

CITY, STATE: _____

ZIP: _____

PHONE: _____

E-MAIL: _____

DETAILS

DATE: _____

INVOICE NO. _____

TERMS: _____

EVENT: _____

AUCTIONEER: _____

BILLING

COMPANY: _____

ATTN: _____

ADDRESS: _____

CITY, STATE: _____

ZIP: _____

PHONE: _____

E-MAIL: _____

SHIPPING

COMPANY: _____

ATTN: _____

ADDRESS: _____

CITY, STATE: _____

ZIP: _____

PHONE: _____

E-MAIL: _____

DESCRIPTION	ITEM #	AMOUNT (\$)
NOTES: _____ _____ _____	SUBTOTAL	
	TAX / VAT	
	SHIPPING	
	TOTAL	

THANK YOU

