

Grocery Store Name

Address Line 1

Address Line 2

Phone: (xxx) xxx-xxxx

Sales Invoice

Invoice #: _____

Date: __ / __ / __

Cashier: _____

#	DESCRIPTION	QTY	UNIT PRICE	TOTAL
1	—	_____	_____
2	—	_____	_____
3	—	_____	_____
				Subtotal _____
				Tax _____
				Total _____

Customer Name: _____

Thank you for shopping with us!