

PAYMENT INFORMATION

Method: _____

Check / Txn #: _____

Auth Code: _____

Notes / Received Conditions:

Subtotal	
Freight / Shipping	
Sales Tax / Duties	
Total Received	
Balance Due	

Authorized Signature

Received By (Print & Sign)

.....
All claims for shortages or damaged goods must be made within _____ days of receipt.

Thank you for your business!