

DEFERRED INVOICE

Invoice No: _____
Date: _____
Due Date: _____

BILL TO

SHIP TO

DESCRIPTION	QTY	UNIT PRICE	TOTAL

DEFERRED PAYMENT TERMS

Deferred Payment Option: _____
Deferral Period: _____
Deferred Payment Due Date: _____
Interest / Finance Rate (%): _____

Subtotal: _____

Tax: _____

Total Invoice: _____

Down Payment: _____

Deferred Balance: _____

CUSTOMER SIGNATURE & DATE

AUTHORIZED REPRESENTATIVE & DATE