



Invoice No. \_\_\_\_\_

# INVOICE

### Customer

Name Oak Creek Lion's Club  
 Address Member Reimbursement  
 City \_\_\_\_\_  
 Phone \_\_\_\_\_

Date \_\_\_\_\_  
 Order No. \_\_\_\_\_  
 Rep \_\_\_\_\_  
 FOB \_\_\_\_\_

Qty	Description	Unit Price	TOTAL

### Payment Details

- Cash
- Check # \_\_\_\_\_
- Credit Card

Name \_\_\_\_\_  
 CC # \_\_\_\_\_  
 Expires \_\_\_\_\_

SubTotal	_____
Shipping & Handling	_____
Taxes State	_____
<b>TOTAL</b>	<b>_____</b>

Office Use Only

*Include all receipts with the request for reimbursement*

*Thank you for supporting our Humanitarian service efforts*