

# Vendor Name

# INVOICE

Vendor Address  
Anytown, USA 00000

**DATE:** July 8, 2011  
**INVOICE #** 4  
**FOR:** *Laundry Service*

Tax ID: xx-xxxxxx

**Bill To:**  
NYU -ISAW  
15 E. 84th St. New Yor, NY 10028

DESCRIPTION	AMOUNT
Laundry service (Linens) from April, 2011 (42 x \$11)	\$ 462.00
Laundry service (towels) from April 2011 (71 pieces x \$.50)	35.50
Laundry service (Aprons) from April 2011 (10 pices x \$ 7)	70.00
<b>TOTAL</b>	<b>\$ 567.50</b>

Make all checks payable to Vendor Name  
Please pay on receipt.

**THANK YOU FOR YOUR BUSINESS!**