PACKING SLIP

|  |  |  |
| --- | --- | --- |
| **[Company Name]** |  | Date: |
| [Address] |  | Invoice # |
| [City, State, Zip Code] |  | Order Number: |
| [Phone] |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| DESCRIPTION |  | QUANTITY |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |  |
| --- | --- | --- |
| SHIP TO |  | Thank You! |
| [Company Name] |  |
| [Address] |  |
| [Address] |  |
| [Phone] |  |

