

(A.) Your Company Name

Non-PO INVOICE

(B.) Street Address
City, ST ZIP Code
Phone [number] Fax [number]

(C.) DATE: September 28, 2021
(D.) INVOICE # 100
(E.) Authorized by: *Your name*

Bill To:
(F.) Department / School Name
School District of Philadelphia
440 N. Broad Street
Philadelphia, PA 19130

DESCRIPTION	AMOUNT
(G.)	(H.)
(J.) <input checked="" type="checkbox"/> TOTAL	\$ -

SAMPLE

Make all checks payable to Your Company Name

(I.) If you have any questions concerning this invoice, Contact Name, Phone Number, E-mail

THANK YOU FOR YOUR BUSINESS!

INSTRUCTIONS FOR NON-PO INVOICE TEMPLATE.

- A. Enter supplier name.
- B. Enter remittance address.
- C. Enter invoice date.
- D. Enter invoice number (this must be at least three digits and can lead with zeros)/
- E. Enter authorized name.
- F. Enter school/department name.
- G. Enter description, budget codes, or distribution set.
- H. Enter amount.
- I. Enter contact information.
- J. Electronically sign

INSTRUCTIONS FOR PO INVOICE TEMPLATE

- A. Enter supplier name.
- B. Enter remittance address.
- C. Enter invoice date.
- D. Enter invoice number (this must be at least three digits and can lead with zeros)/
- E. Enter purchase order number, containing “PUR” and five digits (ex: PUR12345).
- F. Enter school/department name.
- G. Enter description.
- H. Enter amount.
- I. Enter contact information.