

Parcel Delivery Invoice

Invoice Number:

Sender:

Date:

Contact:

Recipient Information

Name:

Address:

Phone:

Parcel Description	Weight (kg)	Quantity	Unit Price	Total
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Subtotal				<input type="text"/>
Delivery Fee				<input type="text"/>
Total Amount Due				<input type="text"/>

Payment Method:

Signature: