[Company Name]

PACKING SLIP

[Company Slogan]

[web address]

Date DD/MM/YYYY

Customer ID [12345]

BILL TO:

[Name]
[Company Name]
[Stress Address]
[City, ST ZIP]
[Phone]

SHIP TO:

[Name]
[Company Name]
[Stress Address]
[City, ST ZIP]
[Phone]

ORDER DATE	ORDER NO.	PURCHASE ORDER NO.	CUSTOMER CONTACT
1/26/19	[123456]	[123456]	Purchasing Dept.

ITEM #	DESCRIPTION	ORDER QTY	SHIP QTY
[23423423]	Product XYZ	15	13
[45645645]	Product ABC	1	1
	TOTAL:	**16**	**14**

Comments:

Backordered items will ship as they become available

If you have any questions or concerns, please contact
[Phone #, E-mail]

Thank You For Your Business!