PACKING SLIP

Your Company Name
Street address
City, State ZIP
Phone
Email

Packing slip no.
Order no.
Order date
Ship date
Shipping method
Tracking no.

SHIP TO

BILL TO

Item / SKU	Description	Qty ordered	Qty shipped	Backordered
	Total			

Notes
Please check the contents against this slip and report any missing or damaged items within 5 days of delivery.

Packed by

Received by