## Revenue Division

## BLACK STOCK TOBACCO – SALES INVOICE

Toll Free Regina 800-667-6102 (306) 787-6645

Fax

(306) 787-9644 or (306) 798-3045

									E-mail	: (to k	oe de	termined)
SUPPLIER INFORMAT	TON:					Supplie Licence	r No:					
(Name & Addre	ess)											
Invoice No:		Invoice	Date:	Order No: Salesperson:								
SOLD TO: (Name of Exen	npt Sale Retaile	r)				Retailer' SITES N	s lo:					
Delivery Address:		Street:	Street:			Phone:						
		City:				Fax:						
		Province	e:									
		Postal Code:				Conta Name	act e:					
		•										
Item No	Qty Ordered	Qty Shipped	Des	scription		UPC			Pack Size	Price Per Unit		Amount

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E-mail: (to be determined)

Item No	Qty Ordered	Qty Shipped	Description	UPC	Pack Size	Price Per Unit	Amount
TOTAL:							

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