

How to Use This Invoice Template

To Review Your Current Formatting

- Use page two of this document as a guidance to review your current invoicing format.
- Validate your invoice format is similar and meets Cargill requirements.
- Make required changes to your invoicing format to ensure timely payment.

To Submit Your Charges for Payment

- Convert this file to a fillable PDF using the instructions located on Supplier Central.
- Edit the fields in *italics* on page two to capture the specifics of the transaction being billed to Cargill.
- Submit the edited version of page two via email to CargillFSC_AccountsPayable@Cargill.com
- Repeat these steps for each transaction that requires an invoice be sent to Cargill.

Untuk Meninjau Pemformatan Anda Saat Ini :

- **Gunakan halaman dua dokumen ini sebagai panduan untuk meninjau format faktur Anda.**
- **Memvalidasi format faktur Anda sesuai dan memenuhi persyaratan Cargill.**
- **Lakukan perubahan yang diperlukan pada format faktur Anda untuk memastikan pembayaran tepat waktu.**

Untuk Mengirimkan Pembayaran Tagihan Anda :

- **Konversikan berkas ke PDF yang dapat diisi menggunakan petunjuk yang terdapat di Supplier Central.**
- **merubah bidang miring pada halaman dua untuk menangkap rincian transaksi yang sedang ditagihkan ke Cargill.**
- **Kirimkan versi halaman dua yang telah dirubah melalui email ke CargillFSC_AccountsPayable@Cargill.com**
- **Ulangi langkah-langkah ini untuk setiap transaksi yang membutuhkan pengiriman faktur ke Cargill.**

CONTOH FORMAT FAKTUR

Your Company Name
 Street Address
 City, ST ZIP Code
 Phone: Phone Fax: Fax

INVOICE

INVOICE #XXXX
 DATE DATE

BILL TO:
 Cargill Business Name
 Cargill Attention Line
 Street Address
 City, ST ZIP Code
 Phone: Phone

SHIP TO:
 Cargill Business Name
 Street Address
 City, ST ZIP Code
 Phone: Phone

SALESPERSON	P.O. NUMBER	REQUISITIONER	SHIPPED VIA	F.O.B. POINT	TERMS

LINE ITEM	ITEM QUANTITY	DESCRIPTION	UNIT PRICE	TOTAL

SUBTOTAL	
SALES TAX	
SHIPPING & HANDLING	
TOTAL DUE	

Funds can be electronically remitted to: *Insert Banking Instructions*
 Make all checks payable to:
 Your Company Name
 Physical Remit-To
 City, ST Zip Code

If you have any questions concerning this invoice, contact *Name, phone, email*

THANK YOU FOR YOUR BUSINESS!