ENTERPRISE DISTRIBUTION

123 Logistics Way, Suite 500
Industrial District, NY 10001
contact@enterprisedist.com

INVOICE

Invoice #: [ ]
Date: [ ]
PO #: [ ]

BILL TO

[Customer Name]
[Street Address]
[City, State, Zip]
[Tax ID]

SHIP TO / WAREHOUSE LOC

[Facility Name]
[Street Address]
[City, State, Zip]
[Loading Dock #]

SKU / Item ID	Description	Quantity	Unit Price	Total
[ ]	[ ]	[ ]	[ ]	[ ]
[ ]	[ ]	[ ]	[ ]	[ ]

SKU / Item ID	Description	Quantity	Unit Price	Total
[ ]	[ ]	[ ]	[ ]	[ ]
[ ]	[ ]	[ ]	[ ]	[ ]

Subtotal:	[ ]
Shipping/Freight:	[ ]
Tax:	[ ]
Total Due:	**[ ]**

Terms: Net 30. Please include invoice number with remittance.

Inventory Handling: All items received in good condition unless noted on Bill of Lading.