

DISTRIBUTION INVOICE

Warehouse ID: _____

Invoice #: _____

Date: ____ / ____ / 20____

PO #: _____

FROM (Distributor):

TO (Recipient/Store):

SKU / Item #	Description	Unit	Quantity	Unit Price	Total

Subtotal: \$ _____

Tax: \$ _____

Shipping/Handling: \$ _____

GRAND TOTAL: \$ _____

Stock Control Notes:

Received By (Signature): _____ Date: ____ / ____ / ____