

INVOICE

Warehouse Management System

Invoice #: _____

Date: ____ / ____ / ____

PO #: _____

Ship From:

Warehouse Name: _____

Address: _____

Facility ID: _____

Ship To:

Customer Name: _____

Address: _____

Contact: _____

SKU / Item ID	Description	Location	Qty	Unit Price	Total

Subtotal: \$ _____

Handling Fee: \$ _____

Tax: \$ _____

Grand Total: \$ _____

Notes / Instructions:

Thank you for your business.