INVOICE

[Company Name]
[Address Line 1]
[City, State, Zip]

INVOICE #: _____
DATE: _____
ORDER ID: _____

BILL TO:

_____
_____
_____

SHIP TO:

_____
_____
_____

Item Description	Batch/Lot #	Expiry Date	Qty	Unit Price	Total

Subtotal: $_____

Tax: $_____

Grand Total: $_____

Notes / Batch Certifications: _____

Payment Terms: Net 30. Please include Invoice # on all payments.