

# INVOICE

[Manufacturer Name]  
[Street Address]  
[City, State, Zip]  
[Email/Phone]

Invoice #: \_\_\_\_\_  
Date: \_\_\_\_\_  
PO #: \_\_\_\_\_

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BILL TO:

[Client Name / Brand]  
[Street Address]  
[City, State, Zip]  
[Contact Name]

PRODUCTION SPECS:

Season: \_\_\_\_\_  
Collection: \_\_\_\_\_  
Ship Date: \_\_\_\_\_

STYLE # / DESCRIPTION	COLORWAY	SIZE BREAKDOWN	QTY	UNIT PRICE	TOTAL
[Style Code - Item Name]	[Color]	[S-M-L-XL]	000	\$0.00	\$0.00
[Style Code - Item Name]	[Color]	[S-M-L-XL]	000	\$0.00	\$0.00
Labeling/Packaging Fees	-	-	000	\$0.00	\$0.00

Subtotal: \$0.00  
Shipping/Freight: \$0.00  
TOTAL DUE: \$0.00

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**Payment Terms:** [e.g., 50% Deposit / 50% Before Shipping]

**Notes:** Please include Style # on wire transfers. All goods remain property of [Manufacturer Name] until full payment is received.