

# [Company Name]

[Street Address]  
[City, State, Zip]  
[Tax ID / EIN]

## WHOLESALE INVOICE

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

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### BILL TO:

[Client Business Name]  
[Contact Name]  
[Billing Address]  
[Phone/Email]

### SHIP TO:

[Client Business Name]  
[Warehouse Location]  
[Shipping Address]  
[Shipping Method]

SKU / Item #	Description	Unit Size	Quantity (Bulk)	Unit Price	Total
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SKU / Item #	Description	Unit Size	Quantity (Bulk)	Unit Price	Total
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Subtotal: \$0.00

Wholesale Discount: (\$0.00)

Shipping/Freight: \$0.00

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**Total Due: \$0.00**

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**Payment Terms:** [e.g., Net 30 / Due on Receipt]

**Payment Methods:** [Wire Transfer / ACH / Check Info]

**Notes:** [Return Policy or Damage Claims Policy]