

WHOLESALE INVOICE

Invoice #: _____

Date: _____

[Company Name]
[Street Address]
[City, State, Zip]
[Tax ID / VAT Number]

BILL TO:

[Client Business Name]

[Contact Person]

[Address Line 1]

[Phone / Email]

SHIP TO:

[Warehouse/Facility Name]

[Shipping Address]

[Shipping Contact Phone]

TERMS:

PO #: _____

Payment: [Net 30/60]

Shipping: [FOB/EXW]

SKU / Item #	Description	Quantity	Unit Price	Bulk Disc.	Total
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Subtotal: \$0.00
Freight/Shipping: \$0.00
Tax Rate (%): 0.00
Total Amount: \$0.00

Payment Instructions: [Bank Name] | SWIFT: [Code] | Account: [Number]

Notes: Goods remain the property of [Company Name] until paid in full. Late payments are subject to a [X%] monthly fee.