

WHOLESALE PURCHASE INVOICE

Invoice #: [Number]

Date: [Date]

PO #: [PO Number]

Seller:

[Company Name]

[Street Address]

[City, State, Zip]

[Tax ID/VAT]

Buyer:

[Wholesale Client Name]

[Shipping Address]

[City, State, Zip]

[Contact Email]

Item Description	SKU / Unit	Quantity	Price
[Product Name Description]	[SKU-001]	[00]	\$0.00
[Product Name Description]	[SKU-002]	[00]	\$0.00

Subtotal: \$0.00

Wholesale Discount: (\$0.00)

Tax: \$0.00

Total Due: \$0.00

Payment Terms: [Net 30/COD/etc]

Notes: [Shipping carrier, tracking info, or return policy details]