

[FULFILLMENT COMPANY NAME]

INVOICE

[00000]

Date: [Date]

Service Provider:

[Street Address]

[City, State, Zip]

[Email/Phone]

Client:

[Subscription Box Name]

[Client Contact Name]

[Client Address]

Description of Service	Units	Rate	Total
Kit Assembly / Box Kitting	[Qty]	[\$[0.00]]	[\$[0.00]]
Pick & Pack Fees	[Qty]	[\$[0.00]]	[\$[0.00]]
Storage / Warehousing (Pallets)	[Qty]	[\$[0.00]]	[\$[0.00]]
Postage & Shipping Costs	[Qty]	[\$[0.00]]	[\$[0.00]]
Packaging Materials (Tape, Dunnage)	[Qty]	[\$[0.00]]	[\$[0.00]]

Subtotal: \$[0.00]

Tax: \$[0.00]

Amount Due: \$[0.00]

Notes: [Insert payment terms or bank details here]
Thank you for your business.