

SPECIALTY TOY WHOLESALE

INVOICE

[Number]

Date: [Date]

From:

[Company Name]

[Address Line 1]

[City, State, Zip]

[Email/Phone]

Bill To:

[Retailer Name]

[Address Line 1]

[City, State, Zip]

[Contact Person]

SKU / Item #	Toy Description	Qty	Unit Price	Total

Subtotal: \$0.00

Shipping & Handling: \$0.00

Total Amount Due: \$0.00

Payment Terms: [Net 30/COD/etc]

Notes: All wooden and educational toys meet ASTM F963 safety standards. Please report damages within 48 hours of delivery.