WHOLESALE COSMETICS

123 Beauty Lane, Suite 400
Los Angeles, CA 90001
contact@wholesalemakeup.com

INVOICE # [0000]
DATE: [MM/DD/YYYY]
DUE DATE: [MM/DD/YYYY]

BILL TO:

[Client Name / Company]
[Street Address]
[City, State, Zip]
[Phone Number]

SHIP TO:

[Store Location / Warehouse]
[Street Address]
[City, State, Zip]

SKU / Item #	Product Description	Unit Price	Qty (Units/Case)	Total
[SKU-001]	[Product Name / Shade]	$0.00	0	$0.00
[SKU-002]	[Product Name / Shade]	$0.00	0	$0.00
[SKU-003]	[Product Name / Shade]	$0.00	0	$0.00

Subtotal: $0.00
Bulk Discount: -$0.00
Shipping: $0.00

TOTAL: $0.00

Payment Terms: Net 30. Please make checks payable to **Wholesale Cosmetics LLC**.

Notes: Please report any damaged items or discrepancies within 48 hours of delivery.