

INVOICE

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

Invoice #: _____
Date: _____
Due Date: _____

BILL TO:

[Client Name]
[Client Business Name]
[Client Address]
[Contact Phone]

SHIP TO:

[Shipping Name/Entity]
[Shipping Address]
[City, State, Zip]
[Shipping Method]

SKU / ITEM #	GEMSTONE / MATERIAL DESCRIPTION	CUT/GRADE	QTY	UNIT PRICE	TOTAL

Subtotal: \$ _____
Wholesale Discount (%): - _____
Shipping & Handling: \$ _____
Tax: \$ _____
BALANCE DUE: \$ _____

Terms & Conditions:

All stones are natural unless otherwise stated. Returns accepted within [X] days for store credit only.
Payment Instructions: [Bank Transfer / Check / Credit Card Info]