

[FACTORY NAME]

[Street Address]

[City, State, Zip]

Contact: [Phone/Email]

INVOICE

Invoice #: _____

Date: _____

P.O. #: _____

WHOLESALER (BILL TO)

[Company Name]

[Contact Name]

[Billing Address]

[Tax ID/VAT]

SHIPPING DESTINATION

[Warehouse/Facility Name]

[Shipping Address]

[Freight Forwarder Info]

SKU / Item #	Description	Qty (Units/Cartons)	Unit Price	Total
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SKU / Item #	Description	Qty (Units/Cartons)	Unit Price	Total
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Subtotal: \$0.00

Bulk Discount: (\$0.00)

Freight/Shipping: \$0.00

Total Amount: \$0.00

Payment Terms: [e.g., Net 30 / COD / 50% Deposit]

Banking Instructions: [Swift/BIC, IBAN, Account Number]

Notes: Goods remain property of [Factory Name] until full payment is received.