

INVOICE

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

INVOICE #: _____

DATE: _____

PO #: _____

BILL TO:

SHIP TO:

SKU / Item #	Description	Qty	Unit Price	Total

SKU / Item #

Description

Qty

Unit Price

Total

Subtotal: \$ _____

Wholesale Discount: - \$ _____

Shipping & Handling: \$ _____

Tax: \$ _____

Grand Total: \$ _____

PAYMENT TERMS & INSTRUCTIONS:

Net [] Days. Please make checks payable to [Company Name].

Bank Transfer: [Bank Name] | Account: [Number] | Routing: [Number]