

INVOICE

Automotive Lighting Wholesale Div.

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

VENDOR INFORMATION [Company Name]

[Street Address]

[City, State, Zip]

[Phone Number]

BILL TO [Customer/Shop Name]

[Street Address]

[City, State, Zip]

[Tax ID / Resale #]

SKU / Part #	Description (Make/Model/Bulb Type)	Qty	Unit Price	Total
[SKU-01]	LED Headlight Conversion Kit - [H11/9005]	[0]	\$0.00	\$0.00
[SKU-02]	HID Ballast - 35W Replacement	[0]	\$0.00	\$0.00
[SKU-03]	Fog Light Assembly - Amber Lens	[0]	\$0.00	\$0.00

Subtotal: \$0.00
Shipping: \$0.00
Tax: \$0.00
Total Due: \$0.00

NOTES & TERMS

Net 30. 15% restocking fee on returns. Warranty applies to manufacturer defects only.