

**ORGANIC PET TREATS CO.**  
WHOLESALE DIVISION

**INVOICE**

Invoice #: \_\_\_\_\_  
Date: \_\_\_\_\_  
PO #: \_\_\_\_\_

**VENDOR**

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

**BILL TO**

[Client Name]  
[Client Address]  
[City, State, Zip]  
[Tax ID/EIN]

SKU / Item Description	Quantity (Cases)	Unit Price	Total

Subtotal: \$0.00  
Wholesale Discount: (\$0.00)  
Shipping: \$0.00  
Amount Due: \$0.00

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**Terms & Conditions:**

Payment is due within [30] days. All treats are certified organic and perishables. Please inspect goods upon delivery. Returns accepted within 7 days for damaged wholesale lots only.

**Payment Instructions:**

Make checks payable to [Company Name] or pay via ACH/Wire: [Bank Details]