

[Vendor Name]

Wholesale Pet Grooming Supplies

INVOICE

[0000]

Date: [MM/DD/YYYY]

BILL TO:

[Retailer/Client Name]

[Street Address]

[City, State, Zip]

[Tax ID/VAT Number]

SHIP TO:

[Warehouse/Store Name]

[Shipping Address]

[Contact Phone]

SKU / ITEM #	PRODUCT DESCRIPTION	UNIT SIZE	QTY (CASES)	UNIT PRICE	AMOUNT
[SKU-01]	Hypoallergenic Oatmeal Shampoo	1 Gal	[0]	\$0.00	\$0.00
[SKU-02]	Deep Clean Deodorizing Wash	5 Gal	[0]	\$0.00	\$0.00
[SKU-03]	Professional Silky Conditioner	1 Gal	[0]	\$0.00	\$0.00
[SKU-04]	Flea & Tick Botanical Treatment	16 oz	[0]	\$0.00	\$0.00

Subtotal: \$0.00

Freight/Shipping: \$0.00

TOTAL DUE: \$0.00

Payment Terms: [e.g., Net 30]

Notes: Please include invoice number with your ACH or Check payment. Fragile liquid contents, handle with care.