

TEXTILE WHOLESALE CORP

123 Fabric Way, Industrial District
City, State, Zip Code
Contact: (555) 012-3456

INVOICE

Number: [0000]
Date: [MM/DD/YYYY]
Due Date: [MM/DD/YYYY]

BILL TO

[Client Name]
[Business Name]
[Address Line 1]
[City, State, Zip]

SHIPPING DETAILS

Carrier: [Method]
Tracking: [Number]
Warehouse: [ID/Location]
FOB: [Point]

| SKU / Fabric Type | Composition | Weight (GSM) | Quantity (Yds/M) | Unit Price | Total |
|-------------------|-----------------------|--------------|------------------|------------|----------|
| [Item Code] | [e.g. 100% Polyester] | [000] | [0.00] | [\$0.00] | [\$0.00] |
| [Item Code] | [e.g. Nylon Spandex] | [000] | [0.00] | [\$0.00] | [\$0.00] |

**SKU / Fabric
Type**

Composition

**Weight
(GSM)**

**Quantity
(Yds/M)**

**Unit
Price**

Total

Subtotal: \$[0.00]

Shipping: \$[0.00]

Tax (0%): \$[0.00]

Balance Due: \$[0.00]

Payment Terms: Net 30. Wire transfer or Corporate Check only.

Notes: All synthetic textile claims regarding dye-lot variance must be filed within 10 days of delivery before cutting.