

# INVOICE

[Company Name]  
[Street Address]  
[City, State, Zip]

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

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## BILL TO:

[Client Name]  
[Business Name]  
[Address]  
[Phone/Email]

## SHIP TO:

[Shipping Name]  
[Shipping Address]  
[Shipping Method]

Series / Line	Action Figure	Description	Scale	Qty	Unit Price	Total

Subtotal: \$ \_\_\_\_\_  
Shipping: \$ \_\_\_\_\_  
Tax: \$ \_\_\_\_\_

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**TOTAL: \$ \_\_\_\_\_**

**Terms & Conditions:**

1. Figures are sold in original packaging unless otherwise noted.
2. Payment is due within [Number] days.
3. All bulk sales are final once shipment is dispatched.