

DISTRIBUTION INVOICE

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

Invoice #: _____
Date: _____
PO #: _____

BILL TO:

[Customer Name]
[Customer Address]
[City, State, Zip]

SHIP TO:

[Recipient Name]
[Shipping Address]
[City, State, Zip]

SKU / Item #	Board Game Title	Qty	Unit Price	Total

Subtotal: \$0.00
Shipping: \$0.00
Tax: \$0.00

Total Due: \$0.00

Terms: Net 30. Please make checks payable to [Company Name].

Thank you for your business!