WHOLESALE INVOICE

[Manufacturing Company Name]
[Street Address]
[City, State, Zip]
[Tax ID / VAT Number]

Invoice #: [00000]
Date: [MM/DD/YYYY]
PO #: [Purchase Order Num]

BILL TO

[Customer Company Name]
[Billing Address]
[Contact Name]
[Phone Number]

SHIP TO

[Destination Name]
[Shipping Address]
[Shipping Method]
[FOB Point]

SKU / Item #	Description	Quantity	Unit	Unit Price	Total

Subtotal: $0.00
Wholesale Discount: ($0.00)
Shipping & Handling: $0.00

Total Due: $0.00

Payment Terms: [e.g., Net 30]
Notes: [Bank Details or Manufacturing Lead Time Information]