INVOICE

Invoice No:

Date:

Due Date:

Partner ID:

Agreement Ref:

PRINCIPAL / MANUFACTURER

DISTRIBUTOR / PARTNER

#	SKU / CODE	PRODUCT DESCRIPTION	QTY	LIST PRICE	PARTNER MARGIN %	NET TOTAL

Payment Instructions & Bank Details

Terms of Partnership Delivery

Gross Subtotal:

Total Partner Discount:

Taxable Value:

VAT / Sales Tax:	
Net Payable:	

Authorized Signatory (Principal)

Authorized Receiver (Distributor)