WHOLESALE INVOICE

Invoice No:

Date:

Due Date:

PO Number:

BILL TO (BUYER)

SHIP TO (DESTINATION)

SHIPPING CARRIER
METHOD / TERMS (FOB)
TOTAL PALLETS / EST. WEIGHT
PAYMENT TERMS

PRODUCT / SKU	DESCRIPTION	QTY	UNIT PRICE	DISCOUNT %	TOTAL

WIRE TRANSFER / PAYMENT INSTRUCTIONS

Beneficiary Bank:

Account Name:

Account No. / IBAN:	
SWIFT / BIC:	
Routing Transit:	

Subtotal:	
Wholesale Discount:	
Est. Freight & Handling:	
Tax / VAT:	
Total Due:	

TERMS & CONDITIONS