

PURCHASING INVOICE

FRANCHISE SUPPLY CHAIN DIVISION

Invoice No:

Date:

Order Ref (PO):

Payment Terms:

FRANCHISEE BILLING INFORMATION

.....
.....
.....
.....

Franchise Store/ID No:

DELIVERY DESTINATION (STORE ADDRESS)

.....
.....
.....
.....

Contact Phone:

DISPATCH WAREHOUSE ID

SHIPPING CARRIER

BILL OF LADING / TRACKING NO.

ESTIMATED DELIVERY DATE

ITEM / SKU

PRODUCT DESCRIPTION

QTY
ORDERED

QTY
SHIPPED

UNIT PRICE

TOTAL AMOUNT

ITEM / SKU	PRODUCT DESCRIPTION	QTY ORDERED	QTY SHIPPED	UNIT PRICE	TOTAL AMOUNT

Subtotal

Franchise Discount

Tax Total

Total Due

SUPPLY CHAIN POLICY & PAYMENT TERMS

.....
.....

AUTHORIZED FRANCHISOR REPRESENTATIVE

FRANCHISEE / RECEIVER SIGNATURE

