

SALES INVOICE/ SHIPPING MANIFEST

PLEASE USE PERMANENT INK FOR ALL ITEMS

INVOICE/MANIFEST NUMBER:			
ATTACHED PAGE(S)?	YES	NO	# OF ATTACHED PAGES:

ACTUAL DATE AND TIME OF DEPARTURE:	/ /	AM PM
ESTIMATED DATE AND TIME OF ARRIVAL:	/ /	AM PM

SHIPPER INFORMATION	
STATE LICENSE #	
TYPE OF LICENSE	
BUSINESS NAME	
BUSINESS ADDRESS	
CITY, STATE, ZIP CODE	
PHONE NUMBER	
CONTACT NAME	

RECEIVER INFORMATION	
STATE LICENSE #	
TYPE OF LICENSE	
BUSINESS NAME	
DELIVERY ADDRESS	
CITY, STATE, ZIP CODE	
PHONE NUMBER	
CONTACT NAME	

DISTRIBUTOR INFORMATION			
STATE LICENSE #		DRIVER'S NAME	
BUSINESS NAME		CA DRIVER'S LICENSE#	
STREET ADDRESS		VEHICLE MAKE	
CITY, STATE, ZIP		VEHICLE MODEL	
PHONE NUMBER		VEHICLE LIC. PLATE #	
CONTACT NAME		ACTUAL DATE AND TIME OF ARRIVAL	/ / AM PM

PRODUCT SHIPPED DETAILS							
SHIPPER COMPLETES ALL THE UNSHADED COLUMNS BELOW. RECEIVER COMPLETES <u>ONLY</u> THE SHADED COLUMNS BELOW							
(Please attach additional pages, if needed)							
UID TAG NUMBER (IF APPLICABLE)	ITEM NAME AND PRODUCT DESCRIPTION (INCLUDE WEIGHT OR COUNT)	QTY ORDERED	QTY REC'D	UNIT COST	TOTAL COST	RETAIL ONLY	
						UNIT RETAIL VALUE	TOTAL RETAIL VALUE

PRODUCT REJECTION	
<i>IF PRODUCTS ARE REJECTED, PLEASE CIRCLE THE ITEMS BEING REJECTED IN THE PRODUCT SHIPPED DETAILS SECTION ABOVE</i>	
REASON FOR REJECTION:	

PRODUCT RECEIPT CONFIRMATION			
<p>I CONFIRM THAT THE CONTENTS OF THIS SHIPMENT MATCH IN WEIGHT AND COUNT AS INDICATED ABOVE. I AGREE TO TAKE CUSTODY OF ALL ITEMS AS INDICATED RECEIVED ABOVE – AND WHICH ARE NOT CIRCLED. THE PRODUCTS CIRCLED ABOVE ARE REJECTED FOR DELIVERY AND REMAIN IN THE CUSTODY OF THE DISTRIBUTOR FOR RETURN TO THE SHIPPER AS INDICATED ON THIS FORM AND ALL ATTACHED PRODUCT DETAILS SHEET(S).</p>			
NAME OF PERSON RECEIVING AND/OR REJECTING PRODUCT:		PHONE NUMBER:	
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT:		DATE SIGNED:	

SALES INVOICE / SHIPPING MANIFEST

PRODUCT DETAILS ATTACHMENT PAGE

PLEASE USE PERMANENT INK FOR ALL ITEMS

INVOICE/MANIFEST NUMBER ATTACHED TO:	
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ATTACHED PAGE	OF	TOTAL PAGES
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PRODUCT SHIPPED DETAILS							
SHIPPER COMPLETES ALL THE UNSHADED COLUMNS BELOW. RECEIVER COMPLETES <u>ONLY</u> THE SHADED COLUMNS BELOW							
(Please attach additional pages, if needed)							
UID TAG NUMBER (IF APPLICABLE)	ITEM NAME <u>AND</u> PRODUCT DESCRIPTION	QTY ORDERED (Weight or Count)	QTY REC'D (Weight or Count)	UNIT COST	TOTAL COST	RETAIL ONLY	
						UNIT RETAIL VALUE	TOTAL RETAIL VALUE

PRODUCT REJECTION	
<i>IF A PRODUCT(S) ARE REJECTED, PLEASE CIRCLE THE ITEMS BEING REJECTED IN THE PRODUCT SHIPPED DETAILS SECTION ABOVE</i>	
REASON FOR REJECTION:	

PRODUCT RECEIPT CONFIRMATION	
<p>I CONFIRM THAT THE CONTENTS OF THIS SHIPMENT MATCH IN WEIGHT AND COUNT AS INDICATED ABOVE. I AGREE TO TAKE CUSTODY OF ALL ITEMS AS INDICATED RECEIVED ABOVE – AND WHICH ARE NOT CIRCLED. THE PRODUCTS CIRCLED ABOVE ARE REJECTED FOR DELIVERY AND REMAIN IN THE CUSTODY OF THE DISTRIBUTOR FOR RETURN TO THE SHIPPER AS INDICATED ON THIS FORM.</p>	

THIS PRODUCT DETAILS ATTACHMENT PAGE IS ATTACHED TO INVOICE #		
NAME OF PERSON RECEIVING AND/OR REJECTING PRODUCT:		PHONE NUMBER:
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT:		DATE SIGNED: