INVOICE

[Brokerage Name]
[Address Line 1]
[City, State, Zip]
[Phone/Email]

Invoice #: _____
Date: _____
Load #: _____
Terms: _____

BILL TO

[Customer Name]
[Address]
[Contact Info]

SHIPMENT SUMMARY

Origin: [City, State]
Destination: [City, State]
Carrier: [Carrier Name]

Description (Items/Class/NMFC)	Weight	Pallets	Rate/Unit	Amount
[Freight Description]				
Fuel Surcharge				
Accessorials (Liftgate/Inside Delivery)				

Subtotal: $0.00
Tax: $0.00

Total Due: $0.00

Notes: Please include invoice number with payment. Subject to standard LTL Brokerage Terms and Conditions.