

# REFRIGERATED LOGISTICS

[Street Address]  
[City, State, Zip]  
Phone: (555) 000-0000

## INVOICE

Invoice #: \_\_\_\_\_  
Date: \_\_\_\_\_  
PO #: \_\_\_\_\_

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### BILL TO

[Customer Name]  
[Address]  
[City, State, Zip]

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### SHIPMENT DETAILS

Pickup: \_\_\_\_\_  
Delivery: \_\_\_\_\_  
Truck/Trailer #: \_\_\_\_\_

| Description     | Required Temp | Weight/Qty | Rate | Amount |
|-----------------|---------------|------------|------|--------|
|                 |               |            |      |        |
|                 |               |            |      |        |
| Fuel Surcharge  | -             |            |      |        |
| Reefer Unit Fee | -             |            |      |        |

\* Certified Temperature Range Maintained: \_\_\_\_\_F to \_\_\_\_\_F

Subtotal: \$ \_\_\_\_\_  
Tax: \$ \_\_\_\_\_  
Total Due: \$ \_\_\_\_\_

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## NOTES & TERMS

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Payment is due within [X] days. Please make checks payable to **Refrigerated Logistics**. Goods were transported in climate-controlled conditions as per bill of lading specifications.