WHITE GLOVE COURIER

123 Luxury Way, Suite 100
Concierge City, ST 90210

INVOICE

_____
Date: _____

CLIENT / CONSIGNEE _____
_____
_____
Phone: _____

SERVICE DETAILS Status: **Priority White Glove**
Vehicle: _____
Waybill: _____
PO #: _____

DESCRIPTION OF GOODS & SERVICES	QTY	RATE	AMOUNT
White Glove Pick-up & Specialized Packing	____	$ _____	$ _____
Secure Climate-Controlled Transit	____	$ _____	$ _____
Inside Room-of-Choice Delivery & Unboxing	____	$ _____	$ _____
Debris Removal & Insurance Surcharge	____	$ _____	$ _____

Subtotal: $ _____

Handling/Tax: $ _____

Total Balance Due: $ _____

SPECIAL INSTRUCTIONS / HANDLING NOTES:

Terms: Payment due upon receipt. We appreciate your preference for our premium courier services.

Handling with Care. Delivering with Excellence.