FUEL SURCHARGE INVOICE

[Company Name]
[Street Address]
[City, State, Zip]

Invoice #: _____

Date: _____

BILL TO

[Client Name]
[Client Address]
[Client Contact]

REFERENCE DETAILS

PO Number: _____

Period: _____ to _____

Description of Service / Load ID	Base Rate	Fuel Index Avg	Surcharge %	Amount
[Load / Route Reference]	$0.00	[Price/Gal]	0.00%	$0.00
[Load / Route Reference]	$0.00	[Price/Gal]	0.00%	$0.00

Subtotal (Base Services): $0.00
Total Fuel Surcharge: $0.00
Total Amount Due: $0.00

Payment Terms: Net [30] Days

Notes: Fuel surcharge is calculated based on the [EIA/National] Weekly Retail On-Highway Diesel Prices index.