FUEL SURCHARGE INVOICE

[Fleet Company Name]
[Address Line 1]
[City, State, Zip]

INVOICE #: [00000]
DATE: [MM/DD/YYYY]
PERIOD: [Start Date] - [End Date]

BILL TO:

[Client Name]
[Billing Address]
[Contact Email/Phone]

REFERENCE:

Master Service Agreement: [ID/Ref]
Base Fuel Index: $[Amount]
Current Fuel Index: $[Amount]

Vehicle/Asset ID	Trip/Route Ref	Distance/Units	Surcharge Rate	Total
[Asset ID]	[Reference]	[0.00]	[0.00%]	$[0.00]
[Asset ID]	[Reference]	[0.00]	[0.00%]	$[0.00]
[Asset ID]	[Reference]	[0.00]	[0.00%]	$[0.00]

Subtotal: $[0.00]
Tax (0%): $[0.00]

TOTAL DUE: $[0.00]

Notes: Fuel surcharge is calculated based on the national average price at the time of dispatch versus the contracted base rate. Net terms: 30 days.