# INVOICE

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

**Invoice #:** _____
**Date:** _____
**Due Date:** _____

---

**BILL TO:**

[Client Name]
[Client Address]
[Tax ID / Contact]

**SHIPMENT DETAILS:**

Reference #: _____
Origin: _____
Destination: _____

| Description | Base Rate / Weight | Rate | Total |
|---|---|---|---|
| Freight Transportation Services | | | |
| **Variable Fuel Surcharge**<br>(Based on [Index Name] at $[Current Price]/gal) | [___]% | | |
| Additional Services / Accessorials | | | |

Subtotal: $ _____
Fuel Surcharge Total: $ _____

---

**TOTAL AMOUNT DUE: $ _____**

**Payment Terms:** [Net 30/On Receipt]

**Notes:** Fuel surcharge is calculated weekly based on the national average diesel price index.

Thank you for your business. Please make checks payable to **[Company Name]**.