

CHARTER INVOICE

[Charter Operator Name]

[Street Address]

[City, State, Zip]

[Phone / Email]

Invoice #: _____

Date: _____

PO #: _____

BILL TO

[Client Name]

[Company Name]

[Street Address]

[City, State, Zip]

FLIGHT INFORMATION

Aircraft: _____

Tail Number: _____

Route: _____

Date(s): _____

Description	Quantity / Hours	Unit Price	Total
Aircraft Charter Fee (Block Time)			
Fuel Surcharge			
Landing & Ramp Fees			
Crew Expenses (Overnight/Catering)			

Description	Quantity / Hours	Unit Price	Total
FET / Passenger Taxes			

Subtotal: \$ _____

Tax: \$ _____

Total Due: \$ _____

Payment Terms: Net [X] Days. Please make checks payable to [Charter Operator Name].

Notes: [Insert specific charter terms, cancellation policies, or wire instructions here].