

ECOEXPEDITION CO.

INVOICE NUMBER

#000000

DATE ISSUED

[Date]

GUIDE/PROVIDER

[Name/Business Name]

[Address Line 1]

[City, State, Zip]

[Email/Phone]

EXPEDITION LEAD

[Client Name]

[Organization/Group]

[Address Line 1]

[Destination/Site]

Description of Ecological Services	Units/Days	Rate	Amount
Guided Field Expedition & Interpretation	0	\$0.00	\$0.00
Equipment Rental (Optics/Field Kits)	0	\$0.00	\$0.00
Permit Acquisition & Conservation Fees	0	\$0.00	\$0.00

Description of Ecological Services	Units/Days	Rate	Amount
Logistics & Remote Transportation	0	\$0.00	\$0.00

Subtotal \$0.00
Carbon Offset Contribution \$0.00
Total Due \$0.00

PAYMENT TERMS & EXPEDITION NOTES

Please remit payment within 15 days. A portion of these proceeds supports local reforestation efforts. Thank you for treading lightly and exploring responsibly.