

RAINFOREST TREKKING EXPEDITION

123 Canopy Way, Amazon Basin
Manaus, Brazil

INVOICE

Invoice #: [00000]

Date: [Date]

Due Date: [Date]

BILLED TO:

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

EXPEDITION DETAILS:

Route: [Expedition Name]
Guide: [Lead Guide Name]
Duration: [Start Date] to [End Date]

Description	Quantity	Unit Price	Total
Expedition Base Fee (Permits & Logistics)	[Qty]	[\$0.00]	[\$0.00]
Guided Trekking Services (Daily Rate)	[Qty]	[\$0.00]	[\$0.00]
Equipment Rental (Tents, Boots, Packs)	[Qty]	[\$0.00]	[\$0.00]

Description	Quantity	Unit Price	Total
Ration & Provisions (Organic/Local)	[Qty]	[\$0.00]	[\$0.00]

Subtotal: \$[0.00]

Conservation Tax (5%): \$[0.00]

Amount Due: \$[0.00]

Payment Instructions:

Please include invoice number in wire transfer details. All payments are non-refundable within 30 days of expedition departure.

"Leave only footprints, take only photos."