INVOICE

Company Name
Address Line 1
City, State, Zip

Invoice #: _____
Date: _____
Project: _____

BILL TO:

Name/Company
Address Line 1
City, State, Zip

JOB SITE:

Location Name
Site Address
Contact Person

Equipment Description (Model/ID)	Rental Period	Rate (Day/Wk)	Amount
Motor Grader (e.g. Cat 140M)			
Vibratory Smooth Drum Roller			
Skid Steer w/ Grading Attachment			
Delivery / Pickup Fee	-	-	
Fuel / Environmental Surcharge	-	-	

Subtotal: $_____
Tax: $_____

Total Due: $_____

Terms: Net 30 Days. Please make checks payable to Company Name.

Notes: Equipment must be returned clean and with a full tank of fuel to avoid additional service charges.