INVOICE

[Your Company Name]
[Street Address]
[City, State, Zip]
[Phone Number]

Invoice #: *00000*

Date: *MM/DD/YYYY*

Project ID: *Name/ID*

BILL TO

[Client Name]
[Client Address]
[Client City, State, Zip]
[Client Email/Phone]

JOB SITE DETAILS

[Site Location Name]
[Physical Address]
[On-site Contact Person]

EQUIPMENT DESCRIPTION (MODEL/SERIAL #)	RENTAL PERIOD	RATE TYPE	QTY	UNIT PRICE	TOTAL
e.g. Caterpillar 320 Excavator	*Date From - Date To*	*Daily/Weekly*	*0*	*$0.00*	*$0.00*
e.g. Scissor Lift 1930ES	*Date From - Date To*	*Daily/Weekly*	*0*	*$0.00*	*$0.00*

EQUIPMENT DESCRIPTION (MODEL/SERIAL #)	RENTAL PERIOD	RATE TYPE	QTY	UNIT PRICE	TOTAL
Delivery & Pickup Fees			*1*	*$0.00*	
Fuel Surcharge / Environmental Fees			*1*	*$0.00*	

Subtotal: *$0.00*
Tax (%): *$0.00*
Total Amount: *$0.00*

Terms & Conditions:
1. Payment is due within *X* days.
2. Equipment must be returned in the same condition as received.
3. All maintenance during the rental period is the responsibility of the lessee unless otherwise stated.