

BACKHOE RENTAL INVOICE

Company Name
Address Line 1
Phone: (555) 000-0000

Invoice #: _____
Date: _____

Billed To:

Name: _____
Address: _____
Project: _____

Equipment Details:

Model: _____
Operator: _____
Job Site: _____

| Description of Service / Rental | Qty / Hours | Rate | Total |
|------------------------------------|-------------|------|--------------|
| Backhoe Rental (Daily/Hourly Rate) | | | |
| Operator Labor | | | |
| Mobilization / Transport Fee | | | |
| Fuel Surcharge / Miscellaneous | | | |
| Subtotal: \$ | | | _____ |
| Tax: \$ | | | _____ |
| Total Due: \$ | | | _____ |

Terms: Payment is due within ___ days. Please make checks payable to Company Name.

Notes: _____