

INVOICE

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

Invoice #: _____
Date: _____
Due Date: _____

BILL TO:

[Client Name]
[Client Address]
[Client Contact]

JOB SITE / LOCATION:

[Site Address/Name]
Rental Period: [Start Date] to [End Date]

Generator Model / S/N	Capacity (kVA/kW)	Qty	Rate (Day/Week)	Amount
Additional Services (Fuel, Delivery, Cables)		Quantity/Hours	Unit Price	Amount
Delivery & Pickup Fee				
Fuel Refill / Consumption				

Additional Services (Fuel, Delivery, Cables)	Quantity/Hours	Unit Price	Amount
On-site Technician / Maintenance			

Subtotal: \$0.00

Tax Rate: _____%

Tax Amount: \$0.00

TOTAL DUE: \$0.00

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

Notes: Please ensure the unit is accessible for pickup. Customer is responsible for fuel levels unless otherwise agreed.