

# EV CHARGING INVOICE

[Station Owner Name]  
[Street Address]  
[City, State, Zip]  
[Tax ID / VAT Number]

**Invoice #:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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## CUSTOMER DETAILS

**Account Name:** \_\_\_\_\_  
**Vehicle ID/VIN:** \_\_\_\_\_  
**Fleet ID:** \_\_\_\_\_

## SESSION INFORMATION

**Station ID:** \_\_\_\_\_  
**Location:** \_\_\_\_\_  
**Port Type:** [Level 2 / DC Fast]

Description	Start / End Time	Usage (kWh)	Rate (\$/kWh)	Total
Charging Session Energy	_____ to _____	_____	_____	_____
Idle / Parking Fees	_____ mins	-	_____	_____

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Description	Start / End Time	Usage (kWh)	Rate (\$/kWh)	Total
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Transaction / Service Fee	-	-	-	_____
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Subtotal: \$ \_\_\_\_\_

Tax: \$ \_\_\_\_\_

Total Amount: \$ \_\_\_\_\_

**Payment Status:** [Due on Receipt / Paid via Account]

Thank you for supporting sustainable transport. For billing inquiries, contact [Email Address] or [Phone Number].