

EV FLEET SOLUTIONS

INVOICE

#INV-0000

FROM:

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

BILL TO:

[Client Name]
[Client Address]
[Tax ID / Reference]

DATE: [MM/DD/YYYY]

DUE DATE: [MM/DD/YYYY]

Description	Vehicle ID / Fleet Group	Quantity/kWh	Rate	Amount
Monthly Fleet Subscription	[Fleet ID]	[Qty]	\$0.00	\$0.00
Network Charging Access (kWh)	[Multiple]	[kWh]	\$0.00	\$0.00
Preventative Maintenance	[VIN/ID]	[Qty]	\$0.00	\$0.00
Telematics & Data Services	[Fleet ID]	[Qty]	\$0.00	\$0.00

Subtotal: \$0.00

Tax (0%): \$0.00

Total Balance: \$0.00

Payment Terms: Net 30. Please include invoice number with your bank transfer.

Notes: All maintenance performed in accordance with EV manufacturer specifications.