

FREIGHT INVOICE

[Company Name]
Invoice #: _____
Date: _____

SHIPPER / FROM

CONSIGNEE / BILL TO

BOL #: _____
Mode: _____
Carrier: _____
PO #: _____
Origin: _____
Destination: _____
Weight: _____
Pallets: _____

Description of Charges	Rate	Qty/Weight	Amount
Line Haul / Freight Charge			
Fuel Surcharge			

Description of Charges	Rate	Qty/Weight	Amount
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Accessorial Charges			
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Subtotal: \$0.00

Tax: \$0.00

Total Due: \$0.00

TERMS & NOTES

Payment due within ____ days. Please include invoice number with remittance.