FREIGHT INVOICE

Brokerage Name
Address Line 1
City, State, Zip
MC# / DOT#

Invoice #: _____
Date: _____
Load #: _____

BILL TO:

_____
_____
_____

PAYMENT TERMS:

Net ___ Days

ORIGIN:

_____
Pickup Date: _____

DESTINATION:

_____
Delivery Date: _____

Description	Reference	Rate/Qty	Amount
Line Haul	BOL# _____	1	$

Description	Reference	Rate/Qty	Amount
Fuel Surcharge			$
Accessorials (Tarp/Detention)			$

Subtotal: $_____
Total Due: $_____

NOTES & INSTRUCTIONS:

Please include Invoice # on all remittances. Make checks payable to [Brokerage Name].