HEAVY HAUL BROKERAGE

123 Logistics Way
Transport City, ST 12345
Phone: (555) 010-9999
Email: billing@heavyhaul.com

INVOICE

Invoice #: _____
Date: _____
Load ID: _____

BILL TO:

_____
_____
_____
Tax ID: _____

REMIT PAYMENT TO:

Heavy Haul Brokerage LLC
P.O. Box 98765
Transport City, ST 12345

SHIPMENT DETAILS

Origin: _____
Pickup Date: _____
Destination: _____
Delivery Date: _____

Equipment/Cargo:
_____
Dimensions (LxWxH): _____ **Weight:** _____

Description	Quantity/Miles	Rate	Total
Line Haul / Flat Rate		$	$
Permit Fees (Oversize/Overweight)		$	$
Escort / Pilot Car Services		$	$
Fuel Surcharge		$	$
Accessorials (Tarp, Rigging, etc.)		$	$

Subtotal: $ _____
Tax: $ _____

Total Balance Due: $ _____

Terms: Net 30 Days. Please include Invoice # on check remissions.

Thank you for your business!