

# INVOICE

[Your Business Name]

[Address Line 1]

[City, State, Zip]

Phone: [Phone Number]

Email: [Email Address]

Invoice #: [0000]

Date: [MM/DD/YYYY]

MC Number: [#]

DOT Number: [#]

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## BILL TO (BROKER/SHIPPER)

[Company Name]

[Contact Person]

[Address]

[City, State, Zip]

### LOAD DETAILS

Load/Reference #: [#]

Truck/Trailer #: [#]

Driver Name: [Name]

Description	Quantity/Miles	Rate	Amount
Line Haul / Freight Charge	[0]	[\$0.00]	[\$0.00]
Fuel Surcharge			[\$0.00]
Detention / Layover			[\$0.00]
Lumper / Accessorials			[\$0.00]

Subtotal: [\$0.00]

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**Total Balance Due: [\$0.00]**

**PAYMENT INSTRUCTIONS**

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Make all checks payable to: **[Your Business Name or Factoring Company]**  
Terms: [e.g. Net 30]

**Thank you for your business!**