HEAVY DUTY HAULING

123 Industrial Way
Logistics Hub, ST 00000
Phone: (555) 000-0000

INVOICE # _____

DATE: _____

DUE DATE: _____

CLIENT / BILL TO

Name: _____
Address: _____
City/State: _____
Phone: _____

JOB DETAILS

Origin: _____
Destination: _____
Truck #: _____
Driver: _____

Description of Equipment / Materials	Weight/Qty	Rate	Amount

NOTES / CARGO CONDITION

Subtotal: $ _____
Fuel Surcharge: $ _____
TOTAL: $ _____

Shipper Signature:

_____

Receiver Signature:

_____

Thank you for your business. Please make all checks payable to Heavy Duty Hauling.