

URBAN FREIGHT

123 Logistics Way
Metro City, ST 90001
contact@urbanfreight.com

INVOICE

Invoice #: _____
Date: _____
Due Date: _____

BILL TO

SHIPMENT DETAILS

Waybill/BOL: _____
Origin: _____
Destination: _____

Description	Quantity/Weight	Rate	Amount
Freight Charges			
Fuel Surcharge			
Handling Fees			

Description	Quantity/Weight	Rate	Amount
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Other: _____

Subtotal \$0.00

Tax \$0.00

Total Amount \$0.00

Payment Terms: Net 30 days. Please include invoice number with payment.

Thank you for choosing Urban Freight Logistics.