[BROKERAGE NAME]

[Street Address]
[City, State, Zip]
MC# [Number] | DOT# [Number]

INVOICE

Invoice #: ___________
Date: ___________
Load ID: ___________

BILL TO

[Customer Name]
[Street Address]
[City, State, Zip]
Contact: [Name/Email]

SHIPMENT SUMMARY

Origin: [City, ST]
Destination: [City, ST]
Carrier: [Carrier Name]
PO/Ref #: [Reference Number]

Description of Services	Quantity	Rate	Total
Line Haul / Freight Charges			
Fuel Surcharge			
Accessorials (Tarp, Detention, etc.)			

Subtotal: $0.00
Tax: $0.00
Total Balance Due: $0.00

PAYMENT INSTRUCTIONS

Please make checks payable to: **[Brokerage Name]**

Wire/ACH: [Bank Name] | Acct: [Number] | Routing: [Number]

Terms: Net [Days]. Thank you for your business.