

INVOICE

[Rental Company Name]
[Street Address]
[City, State, Zip]
[Phone/Email]

Invoice #: [0000]
Date: [MM/DD/YYYY]
Due Date: [MM/DD/YYYY]

CLIENT / BAND:

[Contact Name]
[Band Name]
[Address]
[Phone]

EVENT DETAILS:

Venue: [Venue Name]
Load-in: [Date/Time]
Return: [Date/Time]

Equipment Description	Qty	Daily Rate	Days	Total
[Item Name/Serial #]	0	\$0.00	0	\$0.00
[Item Name/Serial #]	0	\$0.00	0	\$0.00
[Item Name/Serial #]	0	\$0.00	0	\$0.00

Subtotal: \$0.00
Delivery/Setup: \$0.00

Security Deposit: \$0.00

TOTAL DUE: \$0.00

Notes / Terms:

1. Equipment must be returned in original condition.
2. Late returns are subject to a [X]% daily penalty.
3. Rental is subject to the terms of the signed Rental Agreement.