RENTAL INVOICE

[Company Name]
[Street Address]
[City, State, Zip]

Invoice #: _____
Date: _____
Due Date: _____

BILL TO

[Customer Name]
[Customer Address]
[Phone/Email]

INSTRUMENT DETAILS

Instrument: _____
Brand/Model: _____
Serial Number: _____

Description	Rental Period	Rate	Amount
Monthly Instrument Rental Fee	[Date] to [Date]	$	$
Maintenance/Protection Plan	-	$	$
Accessories (Mutes, Oils, Mouthpiece)	-	$	$

Subtotal: $ _____
Tax: $ _____
Total Due: $ _____

Terms: Please make checks payable to [Company Name]. A late fee of $___ applies after [Date]. Instrument must be returned in original condition subject to normal wear and tear.