

[BROKERAGE NAME]

[Street Address]

[City, State, Zip]

Phone: [Phone Number]

Email: [Email]

FREIGHT INVOICE

Invoice #: _____

Date: _____

Load ID: _____

BILL TO

[Customer Name]

[Billing Address]

[City, State, Zip]

Attn: Accounts Payable

REMIT TO

[Brokerage Name]

[Remittance Address]

[City, State, Zip]

MC#: _____

SHIPMENT DETAILS

Origin: _____

Pickup Date: _____

Carrier: _____

Destination: _____

Delivery Date: _____

Equipment: _____

Description	Quantity	Rate	Amount
Line Haul / Freight Charges			\$
Fuel Surcharge			\$
Accessorials (Lumper, Detention, etc.)			\$
Other: _____			\$

Subtotal: \$ _____

Total Due: \$ _____

Terms: Net [30] Days. Please include Invoice Number on all checks.

Notes: Proof of Delivery (POD) and Bill of Lading (BOL) are attached for your records.