INVOICE

[Your Company Name]
[Address Line 1]
[Phone Number]

Invoice #: _____
Date: _____
Event Date: _____

Client / Billed To:

[Client Name]
[Organization]
[Address]
[Email]

Venue / Delivery Info:

[Venue Name]
[Delivery Time]
[Pickup Time]

Equipment Description	Qty	Rental Rate (Day)	Duration	Total

Subtotal: $0.00
Delivery/Setup: $0.00

Tax: $0.00

Amount Due: $0.00

Notes / Terms:
1. Security deposit of [Amount] required.
2. Items must be returned clean unless otherwise agreed.
3. Breakage or loss will be billed at full replacement value.