

PAST DUE INVOICE

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

Invoice #: [00000]
Date Issued: [Date]
Original Due Date: [Date]
Days Overdue: [Number]

FINAL NOTICE: IMMEDIATE PAYMENT REQUIRED

BILL TO:

[Customer Name]
[Billing Address]
[City, State, Zip]
[Contact Name]

SHIPMENT DETAILS:

BOL #: [Number]
PRO #: [Number]
Origin: [City, ST]
Destination: [City, ST]

Description	Quantity/Weight	Rate	Amount
Line Haul Charges	[Qty]	[\$[0.00]]	[\$[0.00]]
Fuel Surcharge	-	-	[\$[0.00]]
Accessorial: [Detention/Tarp/Stop]	-	-	[\$[0.00]]

Description	Quantity/Weight	Rate	Amount
Late Payment Penalty	-	-	[\$0.00]

Subtotal: \$[0.00]

Interest/Fees: \$[0.00]

TOTAL OUTSTANDING: \$[0.00]

REMITTANCE INSTRUCTIONS:

Please make checks payable to: [Company Name]
ACH/Wire Transfer: [Bank Name] | Routing: [Number] | Account: [Number]

Failure to remit payment within 48 hours may result in the suspension of future freight services and referral to a collection agency.