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| **RENTAL INVOICE** | | | | |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |
| [Street Address] | | | |  |  |  |  |  |
| [City, ST ZIP] | | | |  | DATE | |  | |
| Phone: [000-000-0000] | | | |  | INVOICE # | |  | |
| Fax: [000-000-0000] | | | |  | CUSTOMER ID | |  | |
| Website: somedomain.com | | | |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| BILL TO | |  |  |  |  |  |  |  |
| [Name] | | |  |  |  |  |  |  |
| [Company Name] | | |  |  |  |  |  |  |
| [Street Address] | | |  |  |  |  |  |  |
| [City, ST ZIP] | | |  |  |  |  |  |  |
| [Phone] | | |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| **DESCRIPTION** | | | | **PERIOD** | **UNITPRICE** | | **AMOUNT** | |
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|  |  |  |  |  | Subtotal | |  | |
|  |  |  |  |  | Tax % | |  | |
| **OTHER COMMENTS** | | | |  | Tax due | |  | |
| 1. Total payment due in 30 days | | | |  | **T O T A L** | |  | |
|  |  |  |  |  |
| 2. Please include the invoice number on your check | | | |  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  | Make all checks payable to | | | |
|  |  |  |  |  | [Your Company Name] | | | |
|  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  | If you have any questions about this invoice, please contact | | | | | | |  |
|  |  | [Name, Phone #, E-mail] | | | | |  |  |
|  |  |  |  |  |  |  |  |  |
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