PROFESSIONAL DOG WALKING

[Your Name/Business Name]
[Address Line 1]
[Phone Number]
[Email Address]

INVOICE

Invoice #: [000]
Date: [Date]
Due Date: [Date]

BILL TO:

[Client Name]
[Pet Name(s)]
[Address Line 1]
[City, State, Zip]

Date	Service Description	Duration	Rate	Amount
[MM/DD]	Individual Walk	[30 min]	$0.00	$0.00
[MM/DD]	Group Hike	[60 min]	$0.00	$0.00
[MM/DD]	Feeding / Home Visit	-	$0.00	$0.00

Subtotal: $0.00
Discount: ($0.00)

TOTAL DUE: $0.00

Payment Instructions:

Please make checks payable to [Business Name] or pay via [Venmo/Zelle/Paypal Details].
Thank you for trusting me with your furry friend!