

GROUNDS MAINTENANCE

123 Service Lane, City, State, Zip
Phone: (555) 000-0000 | Email: billing@example.com

INVOICE

Invoice #: _____
Date: _____
Due Date: _____

BILL TO:

SERVICE LOCATION:

Service Date	Description of Maintenance Services	Qty/Hrs	Rate	Amount
	Lawn Mowing & Edging (Contract Cycle)			
	Pruning & Hedge Trimming			
	Debris Removal & Hardscape Blowing			
	Weed Control & Herbicide Application			

Service Date	Description of Maintenance Services	Qty/Hrs	Rate	Amount
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Irrigation System Inspection/Repair

Subtotal: \$ _____

Tax: \$ _____

TOTAL DUE: \$ _____

Notes: _____

Payment Terms: Net 30. Please make checks payable to the company name above.