INVOICE

[Business Name]
[Address Line 1]
[Phone Number]

Invoice #: [0000]
Date: [MM/DD/YYYY]

Client:

[Client Name]
[Client Phone/Email]

Esthetician:

[Name/Staff ID]

Service Description	Qty	Price	Total
[Service: e.g., Eyebrow Threading]	[ ]	$[ ]	$[ ]
[Service: e.g., Full Leg Wax]	[ ]	$[ ]	$[ ]
[Service: e.g., Upper Lip Wax]	[ ]	$[ ]	$[ ]

Subtotal: $[0.00]

Tax: $[0.00]

Gratuity: $[0.00]

Total Amount Due: $[0.00]

Notes: [e.g., Aftercare instructions provided.]

Payment Methods Accepted: [Cash, Credit, Venmo]

Thank you for your visit!