INVOICE

[Service Provider Name]
[Address Line 1]
[Phone / Email]

Invoice #:
Date:
Due Date:

CLIENT / RESIDENT:

[Name]
[Service Address]
[City, State, Zip]

AGREEMENT TERMS:

Service Frequency:
Contract Ref:

Description of Cleaning Services	Qty/Hours	Rate	Total
[e.g., General Residential Cleaning]			
[e.g., Deep Kitchen/Bath Sanitization]			
[e.g., Window/Floor Add-ons]			

Description of Cleaning Services	Qty/Hours	Rate	Total

Subtotal: $_____

Tax: $_____

Grand Total: $_____

Payment Instructions:
Please make checks payable to _____ or pay via _____.

Thank you for your business!