

# POOL SERVICE CO.

123 Blue Water Lane  
City, State, Zip  
Phone: (555) 000-0000

## INVOICE

Date: \_\_\_\_\_  
Invoice #: \_\_\_\_\_

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**BILL TO:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SERVICE ADDRESS:**

\_\_\_\_\_  
\_\_\_\_\_

Service Date	Description of Maintenance / Chemicals	Qty/Lbs	Rate	Amount
	Weekly Full Service (Skim, Brush, Vacuum)		\$	\$
	Chemical Treatment (Chlorine/Acid/Shock)		\$	\$
	Filter Backwash / Cleaning		\$	\$

**Service  
Date**

**Description of Maintenance /  
Chemicals**

**Qty/Lbs**

**Rate**

**Amount**

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Subtotal: \$ \_\_\_\_\_

Tax: \$ \_\_\_\_\_

Total Due: \$ \_\_\_\_\_

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**Notes:** All chemical levels balanced to industry standards. Next scheduled visit: \_\_\_\_\_

Thank you for your business!