

INVOICE

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

Invoice #: _____
Date: _____

Bill To:

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

Service Schedule:

Weekly Window Cleaning
Frequency: Every [Day of Week]

Date of Service	Description of Work	Qty/Units	Price	Total
[Week 1 Date]	Exterior/Interior Window Cleaning	1	\$	\$
[Week 2 Date]	Exterior/Interior Window Cleaning	1	\$	\$
[Week 3 Date]	Exterior/Interior Window Cleaning	1	\$	\$

Date of Service	Description of Work	Qty/Units	Price	Total
[Week 4 Date]	Exterior/Interior Window Cleaning	1	\$	\$
			Subtotal	\$
			Tax: \$	_____
			Grand Total: \$	_____

Payment Terms: Due within [X] days of invoice date.

Notes: [Special instructions or thank you message]