

# POOL SERVICE INVOICE

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

**Bill To:**  
[Customer Name]  
[Service Address]  
[City, State, Zip]

**Invoice #:** [0000]  
**Date:** [MM/DD/YYYY]  
**Billing Cycle:** [Monthly/Quarterly]  
[RECURRING SERVICE](#)

Service Description	Frequency	Rate	Amount
Standard Maintenance (Skimming, Brushing, Vacuuming)	Weekly	\$0.00	\$0.00
Water Chemistry Analysis & Balancing	Weekly	\$0.00	\$0.00
Standard Chemical Package (Chlorine, Acid, Tabs)	Monthly	\$0.00	\$0.00
Equipment Inspection & Filter Backwash	Monthly	\$0.00	\$0.00
	<b>Subtotal</b>		<b>\$0.00</b>
	<b>Tax</b>		<b>\$0.00</b>
	<b>TOTAL DUE</b>		<b>\$0.00</b>

**Notes:**

[e.g., Filter cleaned on 15th. Water level was low, please refill.]

Payment is due within [X] days. Please make checks payable to [Company Name].

Thank you for your business!