[Company Name]

[Street Address]
[City, State, Zip]
[Phone Number]

INVOICE

Invoice #: [0000]
Date: [Date]

BILL TO:

[Customer Name]
[Service Address]
[Email Address]

SUBSCRIPTION PERIOD:

[Start Date] to [End Date]
Billing Cycle: Weekly

Service Description	Dates	Rate	Amount
Weekly Pool Maintenance (Skimming, Vacuuming, Brushing)	[Week 1]	$[0.00]	$[0.00]
Weekly Pool Maintenance (Chemical Balancing & Filter Check)	[Week 2]	$[0.00]	$[0.00]
Weekly Pool Maintenance	[Week 3]	$[0.00]	$[0.00]

Service Description	Dates	Rate	Amount
Weekly Pool Maintenance	[Week 4]	$[0.00]	$[0.00]
Additional Chemicals/Materials	-	$[0.00]	$[0.00]

Subtotal: $[0.00]

Tax: $[0.00]

Total Due: $[0.00]

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

Thank you for your business!