

GUTTER CLEANING SERVICE

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

INVOICE

Invoice #: _____
Date: _____

BILL TO:

PROPERTY ADDRESS (IF DIFFERENT):

Description of Service	Linear Ft / Units	Rate	Amount
Gutter Cleaning & Debris Removal			
Downspout Flushing & Inspection			
Minor Repairs / Sealing			

Subtotal: \$ _____

Tax: \$ _____

Total: \$ _____

NOTES / PAYMENT INSTRUCTIONS:

Please make checks payable to: _____.

Payment is due within ___ days of service. Thank you for your business!