

# INVOICE

**[Company Name]**  
[Street Address]  
[City, State, Zip]  
[Phone Number]

**Invoice #:** \_\_\_\_\_  
**Date:** \_\_\_\_\_  
**Due Date:** \_\_\_\_\_

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## BILL TO:

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

Description of Work / Mulch Type	Quantity	Unit Price	Total
Mulch Material: [Type/Color]	[Yards/Bags]	\$	\$
Labor: Edging and Bed Preparation	[Hours]	\$	\$
Labor: Mulch Spreading & Cleanup	[Hours]	\$	\$
Delivery Fee	1	\$	\$

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

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**Grand Total: \$ \_\_\_\_\_**

Notes: [e.g., Mulch depth applied at 3 inches. Pre-emergent applied.]

**Payment Terms:** Please make checks payable to [Company Name].