

# [COMPANY NAME]

[STREET ADDRESS, CITY, STATE, ZIP]

## INVOICE

Invoice #: [0000]

Date: [MM/DD/YYYY]

Due Date: [MM/DD/YYYY]

### Bill To:

[Client Name]

[Client Company]

[Address Line 1]

[Address Line 2]

### Service Frequency:

Cycle: [Weekly / Bi-Weekly / Monthly]

Service Period: [Start Date] - [End Date]

Description of Services	Frequency/Qty	Rate	Amount
Commercial Cleaning: [Facility Name]	[0]	\$0.00	\$0.00
Sanitization Add-on	[0]	\$0.00	\$0.00
Consumable Replenishment (Soap/Paper)	[1]	\$0.00	\$0.00

Subtotal: \$0.00

Tax: \$0.00

**Total Due: \$0.00**

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**Payment Instructions:**

Please make checks payable to [Company Name]. For ACH transfers, use [Routing/Account].  
Thank you for your continued business!