

[LANDSCAPING COMPANY NAME]

[Street Address]
[City, State, Zip]
[Phone Number]
[Email/Website]

RETAINER INVOICE

Invoice #: [0000]
Date: [Date]
Due Date: [Date]

CLIENT / PROPERTY OWNER

[Client Name]
[Property Address]
[City, State, Zip]
[Phone Number]

SERVICE PERIOD

[Start Date] to [End Date]
Contract Ref: [Contract ID]

Service Description	Frequency	Rate	Amount
Scheduled Grounds Maintenance Retainer (Mowing, Edging, Blowing)	[Monthly/Quarterly]	\$0.00	\$0.00
Seasonal Property Treatments (Fertilization & Weed Control)	[Fixed Fee]	\$0.00	\$0.00

Service Description	Frequency	Rate	Amount
Irrigation System Monitoring & Adjustments	[Monthly]	\$0.00	\$0.00

Subtotal: \$0.00
Tax Rate ([0] %): \$0.00
Total Due: \$0.00

PAYMENT INSTRUCTIONS & TERMS

Please make checks payable to **[Landscaping Company Name]**. For electronic bank transfers, use Reference: [Invoice #].

Note: This retainer covers the agreed-upon scope of work. Additional restorative work or emergency repairs will be billed separately.