

PET GROOMING

[Business Address Line 1]
[City, State, Zip]
[Phone Number]
[Email/Website]

INVOICE

[0000]
Date: [MM/DD/YYYY]

CLIENT INFORMATION

Owner: [Name]
Phone: [Phone]
Address: [Address]

PET INFORMATION

Pet Name: [Name]
Breed: [Breed]
Weight: [Weight] lbs/kg
Temperament: [Note]

Service Description	Price
Full Grooming Package (Bath, Haircut, Styling)	\$ 0.00
Sanitary Trim & Paw Pad Cleaning	\$ 0.00

Service Description	Price
Nail Trimming & Buffing	\$ 0.00
Ear Cleaning & Plucking	\$ 0.00
Teeth Brushing / Breath Freshener	\$ 0.00
Specialty Shampoo / De-shedding Treatment	\$ 0.00
Subtotal: \$ 0.00	
Tax: \$ 0.00	
Amount Due: \$ 0.00	

GROOMER NOTES

[Insert observations regarding skin condition, coat health, or behavior here]

Thank you for choosing us for your pet's care!

Payment due upon receipt. We accept Cash, Credit, and Debit.