GROOMING INVOICE

[Business Name]
[Address Line 1]
[Phone Number]
[Email/Website]

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

Client Information:

[Client Name]
[Client Phone]
[Address]

Pet Details:

Name: [Pet Name]
Breed: [Breed]
Weight: [Weight]

SERVICE DESCRIPTION	QTY	RATE	AMOUNT
Full Grooming Package (Bath, Haircut, Nails)	1	$0.00	$0.00
Teeth Brushing / Breath Spray	1	$0.00	$0.00
De-Shedding Treatment	1	$0.00	$0.00

SERVICE DESCRIPTION	QTY	RATE	AMOUNT
Specialty Shampoo (Hypoallergenic)	1	$0.00	$0.00

Subtotal: $0.00
Tax: $0.00

Total: $0.00

Notes / Special Care Instructions:
[Notes regarding pet behavior, skin condition, or future recommendations]

Thank you for trusting us with your furry friend!