PET GROOMING INVOICE

[Business Name]
[Address Line 1]
[Phone Number]

Invoice #: _____
Date: _____

CLIENT INFO:

[Owner Name]
[Phone/Email]

PET INFO:

Name: _____
Breed: _____

Service Description	Price
Full Groom (Bath, Haircut, Nails)	$
De-Shedding Treatment	$
Teeth Brushing / Ear Cleaning	$
Special Handling / Dematting Fee	$

Subtotal: $_____

Tax: $_____

TOTAL DUE: $_____

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

Payment is due upon completion of services.