

TAX INVOICE

[Your Company Name]
[Business Registration No.]
[Street Address]
[City, State, Zip]

Invoice #: [0001]
Date: [Month Day, Year]
Due Date: [Month Day, Year]

BILL TO

[Client Name]
[Client Address]
[Client City, State, Zip]
[Phone/Email]

SERVICE PERIOD

[Start Date] to [End Date]

Description of Service	Frequency	Rate	Amount
General Cleaning - Monthly Package	1	\$0.00	\$0.00
Deep Cleaning (Add-on)	-	\$0.00	\$0.00
Cleaning Supplies/Materials	-	\$0.00	\$0.00

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

Total Due: \$0.00

PAYMENT INFORMATION

Bank: [Bank Name] | Account Name: [Name] | Account #: [00000000] | SWIFT/IBAN: [Code]

Thank you for your business!