

[BUSINESS NAME]

[Address Line 1]

[Address Line 2]

Email: [Email Address]

ABN/Tax ID: [Number]

TAX INVOICE

BILL TO:

[Client Name]

[Client Address]

[Client Email]

INVOICE DETAILS:

Invoice #: [0000]

Date: [Date]

Due Date: [Date]

Service Description	Qty/Hrs	Rate	Amount
Regular Office Cleaning - [Location/Floor]	0	\$0.00	\$0.00
Carpet Steam Cleaning / Window Cleaning	0	\$0.00	\$0.00
Consumables (Toilet paper, soap, liners)	0	\$0.00	\$0.00

Subtotal: \$0.00

Tax (0%): \$0.00

Total Due: \$0.00

PAYMENT INSTRUCTIONS:

Bank Name: [Name] | BSB: [000-000] | Account: [00000000]

Thank you for your business!