INVOICE

Cleaning Service Co.

Company Address Line 1

Email / Phone

Date: 00/00/0000

Invoice #: INV-000

BILL TO (Landlord/Property Mgr):
Name / Company
Mailing Address
SERVICE PROPERTY:
Tenant Name
Full Rental Address

Description of Cleaning Service	Hours/Qty	Rate	Total
General Room Cleaning (Dusting, Vacuuming, Floors)	-	$	$
Kitchen Deep Clean (Oven, Fridge, Cabinets)	-	$	$
Bathroom Sanitization & Scrub	-	$	$
Window Cleaning / Interior Glass	-	$	$

Description of Cleaning Service	Hours/Qty	Rate	Total
Carpet Steam Cleaning / Stain Removal	-	$	$
Debris Removal / Trash Out	-	$	$
		GRAND TOTAL	**$0.00**

Notes: All cleaning performed to move-out inspection standards.

Payment Terms: Due upon receipt. Please make checks payable to Name.