

INVOICE

[Landscaping Company Name]
[Street Address]
[City, State, Zip]
[Phone / Email]

Invoice #: [00000]
Billing Date: [Date]
Billing Cycle: [Month, Year]
Due Date: [Date]

BILL TO:
[Client Name / Property Management Firm]
[Billing Address]
[City, State, Zip]
[Contact Email]
PAYMENT TERMS:
Net [30] Days
Recurring Monthly Maintenance

Property Address / Service Description	Frequency	Rate	Amount
Property A: [Address/Name]			
Standard Lawn Care (Mowing, Edging, Blowing)	[4] x Month	[\$[0.00]]	[\$[0.00]]
Bed Maintenance & Weeding	Monthly	[\$[0.00]]	[\$[0.00]]
Property B: [Address/Name]			
Standard Lawn Care (Mowing, Edging, Blowing)	[4] x Month	[\$[0.00]]	[\$[0.00]]
Irrigation System Inspection	Monthly	[\$[0.00]]	[\$[0.00]]

