INVOICE

Company Name
Phone: (555) 000-0000
Email: service@example.com

Invoice #: _____
Date: _____

CUSTOMER INFORMATION

Name: _____
Address: _____
City/State: _____

UNIT INFORMATION

Brand/Model: _____
Serial #: _____
Location: _____

MAINTENANCE CHECKLIST

Clean / Wash Air Filters
Clean Evaporator Coils
Flush Condensate Drain Line
Inspect Outdoor Condenser
Check Refrigerant Levels
Test Remote Control & Modes
Tighten Electrical Connections
Measure Delta T Temp Drop

Description of Service / Parts	Qty	Price	Total
Standard Mini-Split Maintenance Multi-Point Inspection			

Description of Service / Parts	Qty	Price	Total

Subtotal: $_____

Tax: $_____

Total Due: $_____

Notes: _____

Customer Signature