

EDIBLE LANDSCAPE PROJECT

Sustainable & Fruitful Designs

INVOICE

Date: _____
Invoice #: _____

FROM:

[Business Name]
[Address Line 1]
[City, State, Zip]
[Email/Phone]

BILL TO:

[Client Name]
[Project Address]
[City, State, Zip]
[Client Contact]

Description (Plants, Materials, Labor)	Quantity	Unit Price	Total

Subtotal: \$ _____

Tax: \$ _____

Balance Due: \$ _____

Notes / Payment Instructions:

Please make checks payable to: _____

All edible plant installations include a 30-day care guide. Thank you for growing with us!