LAWN CARE PRO

123 Grass Way, Green City, ST 12345
Phone: (555) 000-0000
Email: service@lawnpro.com

INVOICE

Invoice #: _____
Date: _____
Due Date: _____

BILL TO:

Name: _____
Address: _____
City, State: _____

SERVICE ADDRESS:

Same as billing
Address: _____
Property Notes: _____

Service Description	Qty/Hrs	Rate	Total
Mowing, Edging, and Trimming			
Fertilization / Weed Control			
Leaf Removal / Debris Cleanup			
Other: _____			

Subtotal: $ _____
Tax: $ _____
Amount Due: $ _____

NOTES / PAYMENT INSTRUCTIONS:

Please make checks payable to **Lawn Care Pro**. Thank you for your business!

Customer Signature: _____ Date: _____