

DEEP CLEANING INVOICE

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

Invoice #: _____
Date: _____
Due Date: _____

BILL TO

[Client Name]
[Property Address]
[Phone]

SERVICE DETAILS

Square Footage: _____
Rooms/Baths: _____
Service Date: _____

Description of Deep Cleaning Tasks	Quantity/Hours	Rate	Amount
General Deep Clean (All Areas)			
Kitchen (Appliances interior, Cabinets, Degreasing)			
Bathrooms (Grout, Sanitize, Fixture Polish)			

Description of Deep Cleaning Tasks	Quantity/Hours	Rate	Amount
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Windows / Blinds / Baseboards

Add-on: _____

Subtotal \$0.00

Supplies/Materials \$0.00

Discount (\$0.00)

Total Due \$0.00

NOTES & PAYMENT INSTRUCTIONS

Please make checks payable to: **[Company Name]**

Accepted Payment Methods: [Zelle, Venmo, Credit Card, Check]

Thank you for your business!