INVOICE

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

Invoice #: [00000]
Date: [Date]
Due Date: [Date]

Client / Contractor:
[Name / Company]
[Site Address]
[Phone Number]

Project Details:
Job Type: Post-Construction Clean
Project Phase: [Final / Rough / Touch-up]
Square Footage: [Total Sq Ft]

Service Description	Rate/Unit	Qty	Total
Initial Rough Clean (Debris removal, dust knockdown)	$0.00	0	$0.00
Final Detail Clean (Windows, cabinets, floors, fixtures)	$0.00	0	$0.00
Window Cleaning (Interior/Exterior/Tracks)	$0.00	0	$0.00
Floor Scrub/Wax or Carpet Extraction	$0.00	0	$0.00

Subtotal:	$0.00
Tax:	$0.00
Total Due:	**$0.00**

Notes: All cleaning performed per the agreed-upon scope of work. Payment is due within [X] days of invoice date. Please make checks payable to [Company Name].