INVOICE

[Your Company Name]
[Street Address]
[City, State, Zip]
[Phone Number]

Invoice #: *001*

Date: *MM/DD/YYYY*

BILL TO

[Client Name]
[Client Address]
[Client Phone/Email]

SERVICE DETAILS

Service Date: *MM/DD/YYYY*
Frequency: *One-time / Weekly*

Service Description	Quantity/Hours	Rate	Amount
[Description of Cleaning Service]	[0.0]	$[0.00]	$[0.00]
[Additional Tasks/Supplies]	[0.0]	$[0.00]	$[0.00]

Subtotal: $[0.00]
Tax: $[0.00]
Total Due: $[0.00]

Payment Terms: Due within [X] days of invoice date.

Notes: Thank you for your business!