INVOICE

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

Invoice #: [00000]
Original Date: [Date]
Overdue Date: [Date]

PAST DUE NOTICE: LATE PAYMENT FEES APPLIED

Bill To:
[Client Name]
[Client Address]
[Client Phone]
Payment Status: OVERDUE
Days Past Due: [Number]
Original Invoice Reference: [#Ref]

Service Description	Service Date	Rate	Amount
Professional Sanitization & Disinfection Service	[Date]	$[0.00]	$[0.00]
Supply/Equipment Disposal Fee	-	$[0.00]	$[0.00]
Late Payment Penalty ([0]%)	-	-	**$[0.00]**

Subtotal: $[0.00]

Tax: $[0.00]

Total Amount Due: $[0.00]

Payment Instructions:
Please remit payment immediately via [Check/Bank Transfer/Online Portal].
Checks payable to: [Company Name]

Note: Further delays may result in a suspension of scheduled sanitization services.