

Weekly Housekeeping Service Quotation

Client Name: _____
Address: _____
Contact No.: _____
Email: _____
Date: ____ / ____ / ____
Quotation No.: _____

Service Details

Service Description	Frequency	Unit Cost	Quantity	Total

Subtotal	
Discount	
Total Amount	

Remarks & Terms

Prepared by: _____

Name: _____
Signature: _____

Date: ____ / ____ / ____

Approved by:

Name: _____
Signature: _____

Date: ____ / ____ / ____