

# Cleaning Service Invoice

## From

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## To

Client Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## Invoice Details

Invoice #: \_\_\_\_\_

Date: \_\_\_\_\_

Due Date: \_\_\_\_\_

Description	Service Date	Hours	Rate	Amount

Subtotal: \_\_\_\_\_

Tax: \_\_\_\_\_

Total: \_\_\_\_\_

Notes: \_\_\_\_\_

Authorized Signature

Date \_\_\_\_\_