

# INVOICE

Invoice No: \_\_\_\_\_

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

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

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## BILL TO

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

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

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

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

## SERVICE PERIOD

Week Start: \_\_\_\_\_

Week End: \_\_\_\_\_

Property Loc: \_\_\_\_\_

Contract Ref: \_\_\_\_\_

DAY	DESCRIPTION OF MAINTENANCE SERVICES	HOURS/QTY	RATE	TOTAL
Monday	_____	_____	_____	_____
Tuesday	_____	_____	_____	_____
Wednesday	_____	_____	_____	_____
Thursday	_____	_____	_____	_____
Friday	_____	_____	_____	_____
Saturday	_____	_____	_____	_____
Sunday	_____	_____	_____	_____

Notes / Special Instructions:

**Subtotal:**

\_\_\_\_\_

**Tax Rate:**

\_\_\_\_\_

**Tax Total:**

\_\_\_\_\_

**Total Due:**

\_\_\_\_\_

\_\_\_\_\_

Service Provider Signature

\_\_\_\_\_

Customer Signature

\_\_\_\_\_