

RECEIPT

Receipt No.	
Date	

CUSTOMER INFORMATION

Name

Address

Phone

Email

PROJECT SITE DETAILS

Site Address

Property Type

Service Date

Supervisor

DESCRIPTION OF POST-CONSTRUCTION CLEANING SERVICES	QTY / HRS	RATE	TOTAL

PAYMENT METHOD

- Cash
- Check
- Card
- Bank Transfer

Reference/Check No.

Subtotal	-----
Tax / VAT	-----
Total Paid	_____

RECEIVED BY (CUSTOMER SIGNATURE)

ISSUED BY (AUTHORIZED REPRESENTATIVE)

Thank you for your business!