WINDOW CLEANING INVOICE

WINDOW CLEANING COMPANY

Business name _____

Address _____

Phone / email _____

INVOICE DETAILS

Invoice no. _____

Invoice date _____

Payment terms _____

Due date _____

Work order no. _____

BILL TO (CUSTOMER)

Customer name _____ Phone / email _____

Service address _____

PROPERTY

Home _____ Windows _____

Service date _____

WINDOWS

Item	Details	Qty	Unit	Rate	Amount

Windows subtotal

SCREENS AND TRACKS

Item	Details	Qty	Unit	Rate	Amount

Screens and tracks subtotal

HOW TO PAY

Accepted methods _____

Account name _____

Bank details _____

Payment reference _____

Subtotal

Height surcharge on windows (_____%)

Sales tax, if applicable (_____%)

Amount due

SERVICE NOTES

_____

_____

Please quote the invoice number with your payment.