PRESSURE WASHING INVOICE

| | DETAILS | | | |
|----------------------|-------------------|--------------|-------------|--|
| | DATE: | | | |
| | INVOICE NO | | | |
| FDOM | DILL TO | | | |
| FROM | BILL TO | | | |
| COMPANY: | | COMPANY: | | |
| ATTN: | ATTN: | | | |
| ADDRESS: | ADDRESS: | | | |
| CITY, STATE: | CITY, STATE: | | | |
| ZIP: | ZIP: | | | |
| PHONE: | PHONE: E-MAIL: | | | |
| E-MAIL: | E-MAIL: | | | |
| | | | | |
| DESCRIPTION | HOURS | RATE (\$/HR) | AMOUNT (\$) | |
| | | | | |
| | | | | |
| NOTES / JOB DETAILS: | | SUBTOTAL | | |
| NOTES / JOB DETAILS: | | DISCOUNT | | |
| NOTES / JOB DETAILS: | | | | |

THANK YOU FOR YOUR BUSINESS

