LANDSCAPING INVOICE

Bill From Customer Invoice #
Invoice Date
Payment Due

| Service Provided | Time / Parts | Rate/Cost (\$) | Total (\$) |
|------------------|--------------|----------------|------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Subtotal | | | |
| Sales Tax | | | |
| Other | | | |
| Total | | | |

Thank you for your business!

To avoid late charges, please send payment within 30 days of receiving this invoice.