INVOICE

Business name _____

Phone _____ Email _____

Address or service area _____

Invoice # _____

Invoice date _____

Due date _____

BILL TO

Customer _____ Contact _____

Phone or email _____ PO # _____

WORK COVERED

Period from _____ to _____ Location _____

Date	Wash type	Vehicles	Price each	Amount

WAYS TO PAY

Card · Cash

Zelle _____

Venmo _____

Cash App _____

PayPal _____

Subtotal _____

Discount (optional) _____

Sales tax (if your state taxes this work) _____

TOTAL DUE _____

NOTES

Unit numbers or plates washed, or anything else for the customer.

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