PRESSURE WASHING INVOICE

Invoi]	[Pres	sure W	ashing	
	e Date	_			_	
Due	Date	1	Con	npany N	lamej	
Tax I	Rate]				
Fr	rom		То			
[Con	[Company Name]		[Company	[Company Name]		
[Attn]	[Attn]			[Attn]		
[Street Address]			[Street Add	[Street Address]		
[City,	[City, State, Zip]			[City, State, Zip]		
[Phor	[Phone]			[Phone]		
[E-Ma	[E-Mail]		[E-Mail]	[E-Mail]		
0	Des	cription	Hours	Rate	Amount	
T						
	_					
Note	Notes:			Sub Total		
			Discount			
				Tax Total		
				Paid		

Due Amount