|  |  |  |
| --- | --- | --- |
|  | **SERVICE** INVOICE | **BILL TO:** |
| **Customer Name**  Address Here  City, State, Zip Code  Email: email@website.com  Phone: (222)333-4444 |

Invoice No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **#** | **DESCRIPTION** | **HOURS** | **RATE** | **TOTAL** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  | | SUBTOTAL | |  |
| TAX | |  |
| **TOTAL** | | **$0.00** |

*Please let us know if you have any questions or need further assistance contact at (333)555-6666.*

**Notes:**

• Please make checks payable to [Your Daycare Name]

• Payment is due by the due date to avoid late fees.

**Due Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_