

# Commercial Cleaning Service Invoice

**From:**  
ABC Cleaning Solutions  
1234 Clean St.  
City, State ZIP  
(123) 456-7890

**Invoice #:**   
**Date:**   
**Due Date:**

**Billed To:**

Description	Quantity	Unit Price	Amount
<div></div>	<div></div>	<div></div>	<div></div>
<div></div>	<div></div>	<div></div>	<div></div>

Subtotal:

Tax:

**Total:**

**Notes:**

*Thank you for your business!*