

Dog Walking Service Bill

Bill To:

Date:

Description	Rate	Quantity	Amount
Dog Walking - 30 min	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dog Walking - 60 min	<input type="text"/>	<input type="text"/>	<input type="text"/>
Additional Services	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total			<input type="text"/>

Notes:

Dog Walker Signature: