

CLEANING INVOICE TEMPLATE

This Cleaning Invoice ("Invoice") is issued by _____
("Service Provider") to _____ ("Client") on the
_____ day of _____ ,
20 _____ .

1. SERVICE PROVIDER INFORMATION:

- Name: _____
- Address: _____
- Phone: _____
- Email: _____

2. CLIENT INFORMATION:

- Name: _____
- Address: _____
- Phone: _____
- Email: _____

3. DESCRIPTION OF SERVICES:

The Service Provider has performed the following cleaning services for the Client:

4. ITEMIZATION OF SERVICES:

Description of Task	Hours Worked	Rate per Hour	Total Cost
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Total Amount Due: _____			

5. PAYMENT TERMS:

- Payment Due Date: _____ day of _____, 20_____

- Payment Method: _____

- Late Payment Penalties: If payment is not received by the due date, a late fee of _____ % per month will be applied to the outstanding balance.

6. GOVERNING LAW:

This Invoice shall be governed by and construed in accordance with the laws of the State of _____.

7. SEVERABILITY:

If any provision of this Invoice is found to be invalid or unenforceable, the remaining provisions shall continue in full force and effect.

8. ENTIRE AGREEMENT:

This Invoice constitutes the entire agreement between the parties regarding the subject matter

hereof and supersedes any prior agreements or understandings.

9. NOTICE PROVISIONS:

Any notices required or permitted under this Invoice shall be in writing and sent to the addresses specified above. Notices shall be deemed received upon delivery if delivered personally, on the next business day if sent by overnight courier, or three days after mailing if sent by certified mail.

10. AMENDMENT PROCEDURES:

This Invoice may only be amended or modified in writing signed by both parties.

11. DEFAULT AND REMEDY PROVISIONS:

In the event of default by the Client, the Service Provider may pursue any remedies available under applicable law, including but not limited to, the right to recover the outstanding balance, late fees, and any costs of collection, including reasonable attorney's fees.

12. TERMINATION CONDITIONS:

This Invoice may be terminated by mutual agreement of the parties or by the Service Provider if the Client fails to make payment as agreed. Upon termination, the Client shall remain liable for any outstanding balance and applicable late fees.

13. FORCE MAJEURE:

The Service Provider shall not be liable for any failure to perform its obligations under this Invoice if such failure is due to circumstances beyond its reasonable control, including but not limited to acts of God, war, or governmental restrictions.

SIGNATURES:

Service Provider:

Signature: _____

Date: _____

Print Name: _____

Client:

Signature: _____

Date: _____

Print Name: _____

WITNESS:

Signature: _____

Date: _____

Print Name: _____

NOTARY PUBLIC:

State of _____

County of _____

On this _____ day of

_____, 20 _____,

before me, _____, a Notary Public in and for said state,
personally appeared _____, known to me to be the
person(s) whose name(s) is/are subscribed to the within instrument and acknowledged that
he/she/they executed the same for the purposes therein contained.

In witness whereof, I hereunto set my hand and official seal.

Signature: _____

Date: _____

Print Name: _____

Notary Seal: _____