**Lawn Maintenance Invoice**

|  |
| --- |
| CUSTOMER ACCOUNT NO: |
| PHONE NO: |
| INVOICE DATE: |
| ACCOUNT TYPE  Residential Regular  Commercial 1-Time |
| **FREQUENCY KEY** |
| **AN** –Annually  **6M –** 6 Months  **3M** –3 Months **M0 –** Monthly  **B1 –** B Monthly **WK** - Weekly |

** COMPANY NAME/LOGO**

123 Company Street. City, ST 12345

Phone #’S [www.website.com](http://www.website.com)

TO:

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TERMS:

**PLEASE RETURN THIS PORTION WITH PAYMENT**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **WORK DONE** | **FREQUENCY** | **DESCRIPTION/MATERIAL USED** | | | **UNIT** | **AMOUNT** |
| LAWN MOWING |  |  | | |  |  |
| EDGING |  |  | | |  |  |
| WEED CONTROL |  |  | | |  |  |
| PRUNING/TRIMMING |  |  | | |  |  |
| FERTILIZING |  |  | | |  |  |
| SPRING/FALL CLEAN UP |  |  | | |  |  |
| TREE LOPPING |  |  | | |  |  |
| GUTTER CLEAN |  |  | | |  |  |
|  |  |  | | |  |  |
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|  |  |  | | |  |  |
| WIND DIRECTION  **N NE E SE S SW W NW** | | | WIND SPEED  **0-5 6-10 11-15** | **EQUIPMENT CHARGE** | |  |
| **SUB-TOTAL** | |  |
| DATE: | | TIME:  **A.M. P.M.** | |  | |  |
| **TAX** | |  |
| TECHNICIAN’S SIGNATURE: | | | | **TOTAL** | |  |

***Thank You!***