**INVOICE**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **[COMPANY NAME]** |  |  | Invoice No: |  |
| [Address] |  |  | Invoice Date: |  |
| [Phone Number] |  |  | Due Date: |  |
| [Contact person] |  |  | PO No: |  |
| [Email] |  |  | Terms: |
| **BILL TO:** | DepartureDate: |  | Pet info: |
| [Address] |
| [Email] | Return Date: |  |
| [Phone Number] |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Day of Week | Date | Services Provided | Time In | Time Out | Total Time(Minutes) | ExtraCharges |
| Mondy |  |  |  |  |  |  |
|  |  |  |  |  |
| Tuesday |  |  |  |  |  |  |
|  |  |  |  |  |
| Wednesday |  |  |  |  |  |  |
|  |  |  |  |  |
| Thursday |  |  |  |  |  |  |
|  |  |  |  |  |
| Friday |  |  |  |  |  |  |
|  |  |  |  |  |
| Saturday |  |  |  |  |  |  |
|  |  |  |  |  |
| Sunday |  |  |  |  |  |  |
|  |  |  |  |  |
| Notes/Comments: | Subtotal extra charges |  |
| Total Vists |  |
| Per-visit charge |  |
| Total visit Charges |  |
| Total charges |  |
| Discount |  |
| Deposit Paid |  |
| Payment Method: | **Total Due** |  |

*Thank you!*