# Cleaning receipt

No. _____ Date _____

Your business _____ Phone _____

Client _____ Date of service _____

Address _____

## Service

Type of clean ☐ Standard ☐ Deep ☐ Move-in/out

Bedrooms _____ Bathrooms _____ Square feet _____

| Description | Amount |
|---|---|
| Cleaning | $ _____ |
| ☐ Inside oven | $ _____ |
| ☐ Inside fridge | $ _____ |
| ☐ Inside cabinets | $ _____ |
| ☐ Baseboards | $ _____ |
| ☐ Windows, inside | ____ × $ ____ |
| ☐ Pet hair | $ _____ |
| ☐ Laundry, loads | ____ × $ ____ |
| Other _____ | $ _____ |
| Subtotal | $ _____ |
| Discount | – $ _____ |
| Tax | $ _____ |
| **Total** | **$ _____** |

## Payment

☐ Cash ☐ Check No. _____ ☐ Zelle ☐ Venmo ☐ Cash App ☐ Card

Deposit paid _____ Amount paid _____ Date paid _____

Balance due _____ ☐ **Paid in full**

## Notes

_____

_____

**Thank you for your business!**

Received by _____

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