# PET SITTER INVOICE

Your business name | Phone | Email

Address | VAT no. (if registered) | Invoice no.

Invoice date | Due date | Client name

Client address | Job or event address

## WORK AND CHARGES

Typical lines: Daily visits, 12 at £14; Overnight stays, 2 at £40; Medication, 14 days; Bank holiday premium.

| Description | Qty | Unit price | Price |
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Subtotal

Deposit already paid

VAT

**Total due**

Bank name | Sort code | Account no.

Payment terms or notes

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