



Your Service Company Name

Street Address
City, ST ZIP Code
Phone Number, Web Address, etc.

HOURLY INVOICE

DATE:
INVOICE #:

BILL TO:	JOB LOCATION
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P.O. #	SALES REP. NAME	TERMS	DUE DATE

#	DESCRIPTION	HOURS	RATE	AMOUNT

NOTES: <div style="border: 1px dashed black; height: 30px; width: 100%;"></div>	SUBTOTAL	-
	TAX 8.000%	-
	SHIPPING & HANDLING	-
	TOTAL	-
	PAID	-
	TOTAL DUE	-

THANK YOU FOR YOUR BUSINESS!