INVOICE

INVOICE
DATE

[Company Name]
[Street Address]
[City,ST ZIP]
Phone
Fax
Website

CLIENT

Name
Company name
Address
Phone

PLEASE MAKE PAYMENT TO

[Company Name]
[Street Address]
[City,ST ZIP]
Phone
Fax
Website

HOURLY RATE

DATE	DESCRIPTION	HOURS	AMOUNT

Subtotal	
Taxable	
Tax Rate	
Tax	
Other	
Total	