**Company Name**

Street Address
C/O
City, State Zip
Phone Number
e-mail/web address

# HOURLY INVOICE

**DATE: February 1, 2005**

To:

Customer Name Here
Customer Address Here
Customer Address Here
Customer City, State, Zip Code Here

Ship to (if different than billing address):

| ITEM CODE | SERVICE DESCRIPTION | HOURS | PAY RATE | AMOUNT |
|---|---|---|---|---|
| | | | | 0.00 |
| | | | | 0.00 |
| | | | | 0.00 |
| | | | | 0.00 |
| | | | | 0.00 |
| | | | | 0.00 |
| | | | | 0.00 |
| | | | **SUBTOTAL** | 0.00 |
| | | | **TAX** | **0.00** |
| | | | **TOTAL DUE** | 0.00 |

Make all checks payable to: Your Company Name

We greatly appreciate your business!

Note: You will after entering the hours and rate you will need to right-click once on the number in the “amount” column and click on “update field” to automatically calculate the total. Delete sentence from this form after you understand how to “update field” to get the totals.