UniformSoft

Your Service Company Name

HOURLY INVOICE

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

DATE:
INVOICE #:

BILL TO:

JOB LOCATION

P.O. #	SALES REP. NAME	TERMS	DUE DATE

#	DESCRIPTION	HOURS	RATE	AMOUNT

	SUBTOTAL	-
TAX	8.000%	-
SHIPPING & HANDLING		-
	TOTAL	-
	PAID	-
	TOTAL DUE	-

NOTES:

THANK YOU FOR YOUR BUSINESS!