

Information Technology Services Estimate

Date:

Client Name:

Project Name:

Description of Service	Hours	Rate	Total
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Subtotal			<input type="text"/>
Tax (%)			<input type="text"/>
Total Estimate			<input type="text"/>

Prepared By:

Contact Information:

Notes / Terms & Conditions: