

IMMIGRATION LAW OFFICES

[Law Firm Name]
[Street Address]
[City, State, Zip]
[Phone/Email]

INVOICE

Invoice #: [0000]
Date: [Date]
Case ID: [Client Reference]

BILL TO:

[Client Name]
[Client Address]
[City, State, Zip]

CASE TYPE:

[e.g., H-1B Visa / Naturalization / I-485]

Description of Services / Filing Fees	Quantity/Hours	Rate	Amount
[Legal Professional Services]	[0.00]	[\$[0.00]]	[\$[0.00]]
[USCIS Filing Fee - Form XXX]	[1]	[\$[0.00]]	[\$[0.00]]
[Administrative/Courier Costs]	[1]	[\$[0.00]]	[\$[0.00]]

Subtotal: \$[0.00]
Trust/Retainer Applied: - \$[0.00]
Total Balance Due: \$[0.00]

Payment Instructions: Please make checks payable to "[Law Firm Name]". For wire transfers or credit card payments, please contact our billing department.

Thank you for choosing our firm for your immigration legal needs.