

[LAW FIRM NAME]

[Street Address]
[City, State, Zip]
[Phone Number]

INVOICE

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

Bill To:

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

Date	Description of Services / Expenses	Hours / Qty	Rate	Amount
[Date]	Monthly Legal Retainer Fee - [Month, Year]	1	[\$[0.00]]	[\$[0.00]]
[Date]	Additional Hourly Services: [Description]	[0.0]	[\$[0.00]]	[\$[0.00]]
[Date]	Administrative/Filing Expenses: [Description]	-	-	[\$[0.00]]

Subtotal: \$[0.00]
Retainer Credit Applied: (\$[0.00])
Total Due: \$[0.00]

Payment Terms: Due within [X] days. Please make checks payable to "[Law Firm Name]".

Retainer Balance: Current remaining retainer balance after this invoice: \$[0.00]