

[Consultant Name]

[Business Address]
[City, State, Zip]
[Email/Phone]

ESTIMATE

Date: [Date]
Estimate #: [000]
Project: [Project Name]

CLIENT / ATTENTION TO: [Client Name]

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

SCOPE SUMMARY:

[Brief description of HR services, e.g., Policy Review, Recruitment Strategy, or Employee Handbook development.]

Service Description	Rate	Qty/Hrs	Total
[HR Consulting Service Name]	\$0.00	0	\$0.00
[HR Consulting Service Name]	\$0.00	0	\$0.00
[Administrative/Expenses]	\$0.00	0	\$0.00

Subtotal: \$0.00
Tax (0%): \$0.00
Estimated Total: \$0.00

TERMS & NOTES:

This estimate is valid for [30] days. Final billing will be based on actual hours worked and expenses incurred. A [0%] deposit is required to commence work. Any changes to the project scope may result in a revised estimate.