

ESTIMATE

[Consultant/Firm Name]
[Address Line 1]
[Email/Phone]

Estimate #: [0000]
Date: [MM/DD/YYYY]
Valid Until: [MM/DD/YYYY]

Client:

[Client Name]
[Company Name]
[Client Address]

Project:

[Case Reference/Matter Description]

DESCRIPTION OF LEGAL SERVICES	HOURS/QTY	RATE	TOTAL
[Initial Consultation & Case Review]	[0.0]	[\$[0.00]]	[\$[0.00]]
[Document Preparation & Research]	[0.0]	[\$[0.00]]	[\$[0.00]]
[Regulatory Compliance Audit]	[0.0]	[\$[0.00]]	[\$[0.00]]

Subtotal: \$[0.00]
Estimated Tax: \$[0.00]
Total Estimate: \$[0.00]

Terms & Conditions:

1. This is a non-binding estimate provided for budgetary purposes only.
2. Actual costs may vary based on final scope of work and filing fees.
3. A signed engagement letter and retainer may be required to commence work.