

ESTIMATE INVOICE

[Law Firm Name]

[Street Address]

[City, State, Zip]

Estimate #: _____

Date: _____

File #: _____

CLIENT / BILLING INFORMATION

[Client Name]

[Property Address]

[Email/Phone]

PROPERTY DETAILS

Type: [Residential/Commercial]

Transaction: [Purchase/Sale/Refinance]

Closing Date: _____

Description of Legal Services / Disbursements	Quantity/Hrs	Rate	Amount
Professional Legal Fee (Closing Services)			\$0.00
Title Search & Examination			\$0.00
Title Insurance Policy (Estimated)			\$0.00
Government Registration/Recording Fees			\$0.00
Courier, Admin & Search Disbursements			\$0.00

Subtotal: \$0.00

Applicable Taxes: \$0.00

Total Estimate: \$0.00

Terms & Conditions:

This document is a good-faith estimate based on the information provided to date. Actual costs may vary depending on title complexities, government fee changes, or unforeseen legal requirements. This is not a final bill.