[LAW FIRM NAME]

[Address Line 1]
[Address Line 2]
[Phone Number]

INVOICE

Invoice #: [0000]
Date: [Date]
Matter ID: [Matter Name/No.]

Client:

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

Payment Terms:

Due within [30] days.
Payable via: [Bank Transfer/Check]

Date	Timekeeper	Description of Services	Hours	Rate	Total
[Date]	[Initials]	[Drafting motions, legal research, etc.]	0.00	$0.00	$0.00
[Date]	[Initials]	[Client consultation, phone call]	0.00	$0.00	$0.00
[Date]	[Initials]	[Court appearance]	0.00	$0.00	$0.00

Subtotal: $0.00
Disbursements/Costs: $0.00
Total Amount Due: $0.00

Notes: Please include the invoice number on your remittance. Legal services rendered are subject to the terms of the signed Engagement Letter.