

**[LAW FIRM NAME]**

[Address Line 1]  
[City, State, Zip]  
[Phone] | [Email]

**INVOICE**

**Invoice #:** [0000]  
**Date:** [Date]  
**Due Date:** [Date]

**BILL TO:**

[Client Name]  
[Company Name]  
[Address Line 1]  
[City, State, Zip]

**RE: INTELLECTUAL PROPERTY MATTERS**

**Matter ID:** [Matter Number] | **Property:** [Trademark/Patent/Copyright Name or App #]

DATE	PROFESSIONAL / ACTIVITY DESCRIPTION	HOURS	RATE	AMOUNT
[Date]	Drafting [Patent/Trademark] Application and Review of Specifications.	0.0	\$0.00	\$0.00
[Date]	Prior Art Search and Analysis; Correspondence with USPTO.	0.0	\$0.00	\$0.00

**DISBURSEMENTS / ADMINISTRATIVE FEES****QUANTITY****COST****TOTAL**

USPTO Filing Fee (Type: [Type])

1

\$0.00

\$0.00

Professional Services: \$0.00

Expenses/Costs: \$0.00

TOTAL DUE: \$0.00

**Payment Instructions:** Please make checks payable to "[Law Firm Name]" or contact us for Wire/ACH instructions. Payment is due within [Number] days.

*This statement reflects legal services rendered and costs advanced on your behalf regarding intellectual property protection.*