

[LAW FIRM NAME]

[Street Address]
[City, State, Zip]
[Phone Number]

INVOICE # [0000]

DATE: [Month DD, YYYY]

MATTER ID: [Case Reference]

CLIENT

[Client Name]
[Company Name]
[Address Line 1]
[Address Line 2]

PAYMENT TERMS

Due Date: [Date]
Payable via: [Wire/Check/ACH]

Date	Description of Services	Hours	Rate	Total
[Date]	[Description of legal work performed]	0.0	\$0.00	\$0.00
[Date]	[Description of legal work performed]	0.0	\$0.00	\$0.00

Subtotal: \$0.00
Expenses/Disbursements: \$0.00
Total Amount Due: \$0.00

Please include invoice number with your payment. Legal services rendered are subject to the terms of the signed Engagement Letter.