

[LAW FIRM NAME]

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

INVOICE

Invoice #: [0000]
Date: [Date]
Matter #: [Client-Matter ID]

BILL TO: [Client Company Name]
Attn: [Contact Name/Legal Dept]
[Client Address]
[City, State, Zip]
MATTER DESCRIPTION: [Case or Transaction Name]
[Brief Description of Legal Services Provided]

Date	Attorney	Description of Services	Hours	Rate	Amount
[MM/DD/YY]	[Initials]	Drafting and reviewing purchase agreement; correspondence with opposing counsel regarding indemnity clauses.	[0.00]	[\$[000]]	[\$[000.00]]
[MM/DD/YY]	[Initials]	Legal research regarding regulatory compliance; internal strategy conference.	[0.00]	[\$[000]]	[\$[000.00]]
		<i>Disbursements: [Filing Fees / Travel / Courier]</i>	1.0	-	[\$[00.00]]

Subtotal: \$[000.00]
Expenses: \$[00.00]
Total Due: \$[000.00]

Please make all checks payable to **[Law Firm Name]**.

Wire Transfer Instructions: [Bank Name] | Account: [Number] | Routing: [Number]

Terms: Net [30] days. Late payments may be subject to interest as permitted by law.