

LAW FIRM NAME

123 Legal Avenue, Suite 500
New York, NY 10001
contact@lawfirm.com

INVOICE

Date: [Date]
Invoice #: [0000]
Matter #: [M&A-000]

CLIENT / BILL TO

[Client Name]
[Street Address]
[City, State, Zip]
Attn: [Contact Person]

MATTER DESCRIPTION

Project [Project Name/Target]
Legal Advisory Services for Merger/Acquisition Transaction

DATE	PROFESSIONAL / DESCRIPTION OF SERVICES	HOURS	RATE	AMOUNT
[Date]	[Attorney Name] Due Diligence: Review of material contracts and disclosure schedules.	0.00	\$0.00	\$0.00
[Date]	[Attorney Name] Drafting and negotiation of Purchase Agreement and Ancillary Documents.	0.00	\$0.00	\$0.00
[Date]	[Attorney Name] Regulatory compliance review and Hart-Scott-Rodino filing preparation.	0.00	\$0.00	\$0.00

Subtotal (Fees): \$0.00

Disbursements/Costs: \$0.00
Total Balance Due: \$0.00

PAYMENT INSTRUCTIONS

Wire Transfer: [Bank Name] | ABA: [000000000] | Account: [0000000000]
Please make checks payable to "[Law Firm Name]" and include the invoice number on the memo line.
Terms: Net 30 days. Late payments may be subject to interest charges.