

[LAW FIRM NAME]

[Street Address]
[City, State, Zip]
[Phone Number]
[Email/Website]

INVOICE

Invoice #: [0000]
Date: [Date]
Matter ID: [Case Number]

ESTATE INFORMATION

Estate of: [Deceased Full Name]
Attention: [Executor/Administrator Name]
Address: [Client Mailing Address]

PROFESSIONAL SERVICES

Date	Description of Legal Services	Hours	Rate	Total
[Date]	Initial consultation; review of Will and Codicils.	[0.0]	[\$[0.00]]	[\$[0.00]]
[Date]	Preparation of Petition for Probate and Letters Testamentary.	[0.0]	[\$[0.00]]	[\$[0.00]]
[Date]	Communication with creditors and inventory of assets.	[0.0]	[\$[0.00]]	[\$[0.00]]

COSTS & DISBURSEMENTS

Date	Description	Amount
[Date]	Court Filing Fees	[\$0.00]
[Date]	Legal Publication / Notice to Creditors	[\$0.00]

Service Subtotal: \$[0.00]

Expenses Subtotal: \$[0.00]

TOTAL DUE: \$[0.00]

Payment Terms: Due within [30] days. Please make checks payable to "[Law Firm Name]".

Thank you for allowing us to assist with this estate matter.