

INVOICE

Law Firm Name
Street Address
City, State, Zip
Phone / Email

Invoice #: _____
Date: _____
Matter ID: _____

CLIENT / BILL TO:

PROPERTY DESCRIPTION / LOCATION:

Parcel ID: _____

Service Description	Quantity / Hours	Rate	Amount
Title Search & Examination			\$
Deed Preparation (Quitclaim/Warranty/Other)			\$
Notary Services			\$
County Recording Fees (Disbursements)			\$
Courier & Administrative Fees			\$

Subtotal: \$ _____

Tax: \$ _____

Total Due: \$ _____

PAYMENT INSTRUCTIONS:

Please make all checks payable to **[Law Firm Name]**. Wire instructions available upon request. Payment is due within 30 days of invoice date.