

[LEGAL FIRM NAME]

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

INVOICE

Invoice #: [0000]
Date: [Date]
Matter ID: [Reference]

BILL TO:

[Client Name]
[Company Name]
[Client Address]

DATE	DESCRIPTION OF PROFESSIONAL SERVICES	HOURS	RATE	AMOUNT
[Date]	[Service/Consultation Detail]	[0.0]	[\$[0.00]]	[\$[0.00]]
[Date]	[Legal Research/Document Review]	[0.0]	[\$[0.00]]	[\$[0.00]]

Subtotal: \$[0.00]
Disbursements: \$[0.00]

Total Balance Due: \$[0.00]

Payment Terms: Net [30] days. Please make checks payable to "[Legal Firm Name]".

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