

INVOICE

[Consultant Name/Law Firm]
[Address Line 1]
[City, State, Zip]
[Email/Phone]

Invoice #: [0000]
Date: [Date]
Due Date: [Date]

Bill To:

[Client Name]
[Company Name]
[Address Line 1]
[City, State, Zip]

Matter Reference:

[Matter Name/Case Number]
[Purchase Order Number]

DATE	DESCRIPTION OF LEGAL SERVICES	HOURS	RATE	TOTAL
[Date]	[Description of professional service/consultation]	[0.0]	[\$[0.00]]	[\$[0.00]]
[Date]	[Document review/Contract drafting]	[0.0]	[\$[0.00]]	[\$[0.00]]
[Date]	[Administrative/Disbursements/Filing Fees]	-	-	[\$[0.00]]

Subtotal: \$[0.00]
Tax/VAT: \$[0.00]

Total Amount: \$[0.00]

Payment Instructions:

Bank Name: [Name]

Account Name: [Name]

SWIFT/BIC: [Code]

Account Number / IBAN: [Number]

Note: Please include the invoice number as a reference for all wire transfers.