

INVOICE

[Law Firm Name]
[Street Address]
[City, State, Zip]
[Phone Number]

Invoice #: [0000]
Date: [Month DD, YYYY]
Case No: [00-00000]
Chapter: [7/11/13]

Client / Debtor:
[Client Name]
[Client Address]
[City, State, Zip]

Description of Legal Services	Date	Hours	Rate	Total
Initial Petition & Schedules Preparation	[MM/DD]	[0.0]	[\$[000]]	[\$[000.00]]
Creditor Meeting (341 Meeting) Attendance	[MM/DD]	[0.0]	[\$[000]]	[\$[000.00]]
Court Filing Fees (Advanced)	[MM/DD]	-	-	[\$[000.00]]
Due Diligence / Credit Report Fees	[MM/DD]	-	-	[\$[000.00]]
			Subtotal	[\$[000.00]]
			Less: Retainer Applied	(\$[000.00])
			Balance Due	[\$[000.00]]

Payment Instructions:

Please make checks payable to "[Law Firm Name]".
For wire transfers or trust account deposits, please contact our billing department.