

# TAX ATTORNEY INVOICE

[Law Firm Name]  
[Street Address]  
[City, State, Zip]  
[Tax ID / EIN]

**Invoice #:** [000000]  
**Date:** [MM/DD/YYYY]  
**Due Date:** [MM/DD/YYYY]  
**Matter ID:** [Client-Tax-Year]

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## BILL TO

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

## CASE / MATTER DESCRIPTION

[IRS Audit Representation / Tax Court Litigation / Estate Planning]  
**Tax Year(s):** [YYYY]

Date	Description of Legal Services	Attorney	Hours	Rate	Amount
[Date]	Initial consultation and review of IRS Notice [Number]	[Initial]	0.00	\$0.00	\$0.00
[Date]	Legal research regarding IRC Section [Number]	[Initial]	0.00	\$0.00	\$0.00
[Date]	Preparation of Power of Attorney (Form 2848) and filing	[Initial]	0.00	\$0.00	\$0.00

Subtotal: \$0.00  
Disbursements/Costs: \$0.00  
**Total Amount Due: \$0.00**

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## PAYMENT INSTRUCTIONS

Please make checks payable to **[Law Firm Name]**. For Wire or ACH instructions, please contact our billing department at [Phone/Email].

*Note: Late payments may be subject to a monthly interest charge of [0%] as per the signed Representation Agreement.*