

# [LAW FIRM NAME]

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

## INVOICE

Date: [Date]  
Invoice #: [0000]  
Matter #: [Tax Court Docket No.]

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### CLIENT / TAXPAYER

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

### CASE INFORMATION

**Case Title:** [e.g., Petitioner v. Commissioner of Internal Revenue]  
**Court:** United States Tax Court

Date	Description of Professional Services	Hours	Rate	Total
[MM/DD/YY]	Drafting Petition for Redetermination of Deficiency.	[0.0]	[\$000]	[\$0.00]
[MM/DD/YY]	Review of Notice of Deficiency and administrative file.	[0.0]	[\$000]	[\$0.00]
[MM/DD/YY]	Communication with IRS Chief Counsel re: Settlement.	[0.0]	[\$000]	[\$0.00]

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### EXPENSES & COURT COSTS

Tax Court Filing Fee \$[60.00]

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Postage / Certified Mail (IRS/Court)

[\$0.00]

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Services Subtotal: \$[0.00]

Expenses Subtotal: \$[0.00]

TOTAL AMOUNT DUE: \$[0.00]

**Payment Terms:** Due within [30] days. Please make checks payable to "[Law Firm Name]".

*Thank you for allowing us to represent you before the United States Tax Court.*