

[LAW FIRM NAME]

Environmental Law & Consulting Services

[Address Line 1]

[City, State, Zip]

[Phone Number] | [Email]

INVOICE

Invoice #: [0000]

Date: [Date]

Matter ID: [Project/Case #]

BILL TO

[Client Name]

[Company Name]

[Address]

[City, State, Zip]

PROJECT / SUBJECT

[Environmental Site Assessment / Regulatory Compliance]

Property: [Address/Location]

Reporting Period: [Start Date] - [End Date]

Date	Professional / Consultant	Description of Services	Hours	Rate	Amount
[Date]	[Name/Initials]	Technical review of Phase I ESA and regulatory filing.	0.00	\$0.00	\$0.00
[Date]	[Name/Initials]	Coordination with EPA/State agencies regarding remediation plan.	0.00	\$0.00	\$0.00

Reimbursable Expenses (Laboratory Fees, Permits, Travel)	Amount
Soil Sample Laboratory Analysis - [Lab Name]	\$0.00

Professional Fees: \$0.00
Disbursements/Expenses: \$0.00
TOTAL DUE: \$0.00

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

Wire Transfer Instructions: [Bank Name] | ABA: [000000000] | ACCT: [0000000000]

This invoice may contain privileged and confidential attorney-client work product.