[Law Firm Name]
[International Office Address]
[City, Country, Postal Code]
[VAT/Tax ID Number]

INVOICE

Date: [DD/MM/YYYY]
Invoice #: [INV-000]
Matter Ref: [CASE-ID]

BILL TO:

[Client Company Name]
[Client Address]
[City, Country]
Attn: [Legal Department/Contact Name]

PAYMENT CURRENCY:
[USD/EUR/GBP]

DATE	DESCRIPTION OF LEGAL SERVICES	HOURS/QTY	RATE	AMOUNT
[Date]	[Service Description: e.g., Cross-border Merger Due Diligence]	[0.00]	[0.00]	[0.00]
[Date]	[Service Description: e.g., Arbitration Representation]	[0.00]	[0.00]	[0.00]
-	**Disbursements / Expenses** [e.g., Filing Fees, Translation, Travel]	-	-	[0.00]

Subtotal: [0.00]
Tax / VAT ([0]%): [0.00]

Total Amount Due: [0.00] [CURRENCY]

Wire Transfer Instructions:
Bank Name: [Bank Name]
SWIFT/BIC: [Code]
IBAN/Account #: [Number]
Beneficiary: [Law Firm Name]

Terms: Payable within [30] days. Late payments are subject to interest as governed by the laws of [Jurisdiction].