

INVOICE

[Law Firm Name]
[Address Line 1]
[City, State, Zip]
[Email/Phone]

Invoice #: _____
Date: _____
Due Date: _____

BILL TO:

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

MATTER:

[Case Reference/ID]
[Matter Description]

Date	Description of Service	Rate/Hr	Hours	Total
	Initial Consultation	\$		\$
	Legal Research & Document Review	\$		\$
	Drafting of Agreements	\$		\$
	Administrative/Filing Fees	-	-	\$

Subtotal: \$ _____

Tax: \$ _____

Total Amount Due: \$ _____

Payment Instructions:

Please make checks payable to **[Law Firm Name]**.

Bank Wire Transfer: [Bank Name] | Acc: [Number] | Routing: [Number]

Thank you for your business.