

Law Office Invoice

Subtotal

Law Office Name

Taxes

Address

Total

Contact Information

Invoice Number

Invoice Date

Due Date

Billed To (Client Name)

Client Address

Client Contact

Services

Date	Description of Service	Hours	Rate	Amount
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date	Description of Service	Hours	Rate	Amount

Subtotal

Taxes

Total

Additional Notes

Authorized Signature

Date