

Law Firm Name

123 Main St, Suite 400
City, State ZIP
Phone: (123) 456-7890
Email: info@lawfirm.com

Invoice #: 001234
Date: 2024-06-20
Due Date: 2024-07-20

BILLED TO

Client Name
Client Company Name
456 Client Rd, Suite 100
City, State ZIP
client@email.com

BILLING DETAILS

Date	Description	Hours	Amount
2024-06-01	Consultation regarding case strategy	2.0	\$400.00
2024-06-05	Drafting legal documents	3.5	\$700.00
2024-06-10	Court Appearance	1.0	\$200.00
Subtotal			\$1,300.00
Taxes (0%)			\$0.00
Other Fees			\$0.00
Total Due			\$1,300.00

Note: Please remit payment within 30 days. Make checks payable to Law Firm Name. Thank you for your business.