

**Law Office Name**

Attorney Name

Address Line 1

Address Line 2

City, State ZIP

Phone: (xxx) xxx-xxxx

Email: your@email.com

**INVOICE**

Invoice #: \_\_\_\_\_

Date: \_\_\_\_\_

Due Date: \_\_\_\_\_

**Bill To:**

Client Name

Address Line 1

Address Line 2

City, State ZIP

**Services**

Description	Date	Hours	Rate	Amount
Legal Consultation	____/____/____	____	\$____	\$____
Document Drafting	____/____/____	____	\$____	\$____
<b>Subtotal</b>				<b>\$____</b>
Tax				\$____
<b>Total Due</b>				<b>\$____</b>

**Notes**

Payment is due within 30 days.

Thank you for your business.