LEGAL SERVICES INVOICE

LAW OFFICE

Firm name _____

Address _____

Phone / email _____

INVOICE DETAILS

Invoice no. _____

Invoice date _____

Payment terms _____

Due date _____

Billing period _____

BILL TO (CLIENT)

Client _____ Attention _____

Address _____

Email _____

MATTER

Matter _____

Matter no. _____ Responsible attorney _____

TIME ENTRIES

Date	Timekeeper	Description	Hours	Rate	Amount

Time entries subtotal

FLAT-FEE ITEMS

Date	Timekeeper	Description	Qty	Fee	Amount

Flat-fee items subtotal

COSTS ADVANCED, AT COST

Date	Vendor	Description	Qty	Cost	Amount

HOW TO PAY

Accepted methods _____

Account name _____

Bank details _____

Payment reference _____

Subtotal

Sales tax on fees, if applicable (_____%)

Costs advanced, at cost

Total

Less: retainer applied

Amount due

BILLING NOTES

_____

_____

Please quote the invoice and matter numbers with your payment. Questions about an entry? Contact the responsible attorney.