



# INVOICE

[Street Address]  
[City, ST ZIP]  
Phone: (000) 000-0000  
Email: email@domain.com

INVOICE #	DATE
2034	5/10/2018

## CLIENT

[Name]  
[Street Address]  
[City, ST ZIP]  
[Phone]  
[Email Address]

## PLEASE MAKE PAYMENT TO

[Name]  
[Street Address]  
[City, ST ZIP]

For Legal Services Rendered Through [date]

HOURLY RATE \$150.00

DATE	DESCRIPTION	HOURS	AMOUNT
24-May-2018	Legal Services: Item description one; Item two; Item description three; Item description four; Item description five.	10	1,500.00
1-Jun-2018	Draft of legal document	1.5	225.00
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			-
			-
			-
			-
			-

SUBTOTAL	1,725.00
TAX RATE	7.3125%
TAX	126.14
TOTAL DUE \$	1,851.14

All payments are due within 30 days.

*Thank you for your business!*