LEGAL CONSULTANT INVOICE

TOTAL

	DETAILS		
	DATE:		
	INVOICE NO		
	BAR NUMBER: _		
FROM	BILL TO		
COMPANY:	COMPANY:		
ATTN:	ATTN:		_
ADDRESS:	ADDRESS:		
CITY, STATE:	CITY, STATE:		
ZIP:	ZIP:		
PHONE:	PHONE:		
E-MAIL:	E-MAIL:		
DESCRIPTION	HOURS	RATE (\$/HR)	AMOUNT (\$)
		,	
NOTEO.		SUBTOTAL	
NOTES:			

THANK YOU FOR YOUR BUSINESS

