

Sample Law Firm
1 Legal Way
Third Floor
Judge City, NJ 13468
Phone: (111) 111-1111 Fax: (112) 112-1112

Date: 12/01/2009

Sample Client 1
Creig Jackson
83 Client 1 Street
Apartment 63
Client 1 City, NJ 28465

Re: Consultation
File #: 123-20091

Dear Sample Client 1,

Attached please find invoice # 1. This invoice dated 12/01/2009 is for \$350.00. Your total balance, including past charges, is \$350.00.

Please process this invoice and prompt payment will be greatly appreciated. A self-addressed envelope is also included for your convenience.

Billing Summary

Payment received after 12/01/2009 are not reflected in this statement.

Invoice Amount:	\$350.00
Payment Received:	\$0.00
Remaining Balance:	\$350.00
Previous Invoices Balance:	\$0.00
Balance Due:	\$350.00

Your Current Retainer Balance: \$2,000.00

If you have any questions, please contact me at 113-113-1113.

Sincerely,

Bookkeeper
Accounts Department

Sample Law Firm

1 Legal Way

Third Floor

Judge City, NJ 13468

Phone: (111) 111-1111 Fax: (112) 112-1112

INVOICE

Date: 12/01/2009

Invoice #: 1

Matter: Consultation

File #: 123-20091

Bill To:

Sample Client 1

Creig Jackson

83 Client 1 Street

Apartment 63

Client 1 City, NJ 28465

Due Date: 12/31/2009

Payment received after 12/01/2009 are not reflected in this statement.

Professional Services

Date		Details	Hours	Rate	Amount
12/01/2009	LL	B130 Asset Disposition	1.00	325.00	325.00
			1.00		\$325.00

Additional Charges

Date		Details	Quantity	Rate	Amount
12/01/2009	SB	Courier Fee Courier Fee/Lawyer's Service	1	25.00	25.00
					\$25.00

Invoice Amount **\$350.00**

Payment Received **\$0.00**

Invoice Balance **\$350.00**

Current Retainer Balance **\$2,000.00**

Sample Law Firm

1 Legal Way
Third Floor
Judge City, NJ 13468

Sample Client 1
Creig Jackson
83 Client 1 Street
Apartment 63
Client 1 City, NJ 28465

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Date: 12/01/2009

Dear Sample Client 1,

Attached please find invoice # 1, dated 12/01/2009 for \$350.00. Your total balance, including past charges, is \$350.00. Please process this invoice and prompt payment will be greatly appreciated. Payment received after 12/01/2009 are not reflected in this statement.

Invoice Amount:	\$350.00
Payment Received:	\$0.00
Remaining Balance:	\$350.00
Previous Invoices Balance:	\$0.00
Balance Due:	\$350.00
Your Current Retainer Balance:	\$2,000.00

If you have any questions, please contact me at 113-113-1113.

Sincerely,

Bookkeeper
Accounts Department

Please detach and submit this portion with your payment

Sample Client 1
Creig Jackson
83 Client 1 Street
Apartment 63
Client 1 City, NJ 28465

MAIL TO:

Sample Law Firm
1 Legal Way
Third Floor
Judge City, NJ 13468

Payment Voucher			Amount Paid \$
Invoice #	Invoice Date	Total Due	
1	12/01/2009	\$350.00	

Check enclosed
 Visa Mastercard Amex Discover

Card # _____

Expiry Date: ____/____

Card Holder's Name: _____

Authorized Signature

Sample Law Firm

1 Legal Way

Third Floor

Judge City, NJ 13468

Phone: (111) 111-1111 Fax: (112) 112-1112

INVOICE

Date: 12/01/2009

Invoice #: 1

Matter: Consultation

File #: 123-20091

Bill To:

Sample Client 1

Creig Jackson

83 Client 1 Street

Apartment 63

Client 1 City, NJ 28465

Due Date: 12/31/2009

Payment received after 12/01/2009 are not reflected in this statement.

Professional Services

Date	Details	Hours	Rate	Amount
12/01/2009	LL B130 Asset Disposition	1.00	325.00	325.00
		1.00		\$325.00

Additional Charges

Date	Details	Quantity	Rate	Amount
12/01/2009	SB Courier Fee Courier Fee/Lawyer's Service	1	25.00	25.00
		Total additional charges		\$25.00

Invoice Amount **\$350.00**

Payment Received **\$0.00**

Invoice Balance **\$350.00**

Current Retainer Balance **\$2,000.00**

Sample Law Firm

1 Legal Way

Third Floor

Judge City, NJ 13468

Phone: (111) 111-1111 Fax: (112) 112-1112

Date: 12/2/2009

Sample Client 2

Louis Rossi

98 Client 2 Street

Floor 2

Client 2 City, NJ 37915

Re: Estate Planning

File #:

Dear Sample Client 2,

This is to inform you that your retainer balance is now **\$4,690.00**. It is the firm's policy when retainers fall below **\$5,000.00** to request a payment to restore the retainer to its original level. Accordingly, please send a check in the amount of **\$400.00**. A self-addressed, stamped envelope is included for your convenience.

The amount of the retainer balance on your account will be reflected in your next billing statement. If you have any questions, please contact me at 113-113-1113.

Sincerely,

Bookkeeper

Accounts Department

Sample Law Firm
CLIENT BALANCE REPORT

Balances as of 12/01/2009

CLIENT: Creig Jackson

DATE OPENED	MATTER NAME	MATTER FILE #	UNPAID AMOUNT	UNBILLED AMOUNT	OPERATINGB ALANCE	TRUST BALANCE
12/01/2009	Consultation	123-20091	350.00	0.00	2,000.00	0.00
12/01/2009	Real Estate – Seller	123-20093	750.00	0.00	0.00	24,250.00
TOTAL :			1,100.00	0.00	2,000.00	24,250.00

Sample Law Firm
CLIENT BALANCE REPORT

Balances as of 12/01/2009

CLIENT: Louis Rossi

DATE OPENED	MATTER NAME	MATTER FILE #	UNPAID AMOUNT	UNBILLED AMOUNT	OPERATINGB ALANCE	TRUST BALANCE	
12/01/2009	Estate Planning	124-20092	0.00	975.00	0.00	4,690.00	
			TOTAL :	0.00	975.00	0.00	4,690.00

Sample Law Firm
Accounts Receivable Report

12/01/2009 - 12/01/2009

Date	Invoice #	Client	Matter	Amount	Due Date	Overdue (days)
12/01/2009	1	Creig Jackson	Consultation	350.00	12/31/2009	
12/01/2009	2	Creig Jackson	Real Estate – Seller	750.00	12/31/2009	
Total:				1,100.00		

Sample Law Firm

TimeKeeper's Time Report

11/30/2009 - 12/04/2009

Larry Lawyer

Date	Client	Matter	Billable	Hours	Rate	Amount	Status
11/30/2009	Louis Rossi	Estate Planning	Y	1 : 00	325.00	325.00	Unbilled
11/30/2009	Louis Rossi	Estate Planning	Y	1 : 00	325.00	325.00	Unbilled
12/01/2009	Creig Jackson	Consultation	Y	1 : 00	325.00	325.00	Billed
12/01/2009	Louis Rossi	Estate Planning	Y	1 : 00	325.00	325.00	Unbilled
12/02/2009	Louis Rossi	Estate Planning	Y	1 : 42	325.00	552.50	Unbilled
12/03/2009	Louis Rossi	Estate Planning	Y	2 : 00	325.00	650.00	Unbilled
12/03/2009	Louis Rossi	Estate Planning	Y	1 : 00	325.00	325.00	Unbilled
12/04/2009	Louis Rossi	Estate Planning	Y	1 : 30	325.00	487.50	Unbilled

Total Hold Hours:	0 : 00
Total Unbilled Hours:	9 : 12
Total Billed Hours:	1 : 00
Total Billed Amount:	325.00