

INVOICE

Invoice No: _____
Date: _____
Due Date: _____

CLIENT INFORMATION

BILLING DESTINATION

_____ _____ _____	_____ _____ _____
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Valuation Subject: _____	Valuation Date: _____
Purpose of Valuation: _____	Standard of Value: _____

DESCRIPTION OF PROFESSIONAL SERVICES	HOURS	RATE (\$)	TOTAL (\$)
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Subtotal: _____
Expenses/Databases: _____
Retainer Applied: _____
Total Due: _____

PAYMENT INSTRUCTIONS

Please remittance payment via wire transfer or ACH to the following bank account details:

Bank Name: _____	Account Number: _____
Routing / Transit: _____	Swift Code: _____

AUTHORIZED SIGNATURE