

RETAINER STATEMENT

BILL TO

STATEMENT DETAILS

Statement Date: _____
Statement No: _____
Billing Period: _____
Agreement Ref: _____

DESCRIPTION	AMOUNT
Base Retainer Fees (Current Period)	
Overage Hours / Additional Services (Itemized below)	

Current Charges: _____
Outstanding Balance: _____
Payments / Credits: _____

Total Due:

PAYMENT TERMS & INSTRUCTIONS
