

# Legal Case Fee Sheet

Client Information

Client Name:

Case Number:

Date:

Fee Details

Service Provided	Hours	Rate (per hour)	Total
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Grand Total:

Notes:

Submit