

[Date]

[Client Name]

[Client Address]

[City, State, Zip Code]

RE: Monthly Billing Statement and Trust Account Deduction

Dear [Client Name],

Please find enclosed your billing statement for professional services rendered during the period of [Start Date] to [End Date].

The total amount for this period is \$[Amount]. As per our fee agreement, these funds have been deducted from your trust account balance.

Account Summary:

- Previous Trust Balance: \$[Amount]
- Current Deduction: \$[Amount]
- Remaining Trust Balance: \$[Amount]

No further action is required from you at this time unless your remaining balance has fallen below the minimum retainer requirement specified in our agreement.

If you have any questions regarding these charges, please contact our office within [Number] days.

Sincerely,

[Your Name/Firm Name]

[Phone Number]

[Email Address]