|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| (Name) | (Email) | | | | (Phone Number) | | |
| **Law Firm Internal Audit Quote** | | | | | | | |
|  | | | | | | | |
| **Prepared For:** | | | | | | | |
| (Name) | | | | | | | |
| (Date) | | | | | | | |
|  | | | | | | | |
| **Prepared By:** | | | | | | | |
| (Name) | | | | | | | |
| (Date) | | | | | | | |
|  | | | | | | | |
| **Quote Number:** | | | | | | | |
| (0000) | | | | | | | |
|  | | | | | | | |
| **Pricing** | | | | | | | |
|  | | | | | | | |
| **Description** | | **Quantity** | | **Price** | | - | **Total** |
| Report Preparation | | 1 | | USD 800 | | package | USD 800 |
| Internal Control | | 5 | | USD 90 | | day | USD 450 |
| **Total** | | | | | | **USD 1,250** | |
|  | | | | | | | |
| **Terms & Conditions:** | | |  | | | | |
|  | | | | | | | |
| • Full payment is required before the provision of services. | | | | | | | |
| • This quote is valid for 2 weeks. | | | | | | | |
|  | | | | | | | |
| ***Thank You For Your Business!*** | | | | | | | |