

CONSTRUCTION INVOICE

Contractor Name: [Company Name]

Address: [Street, City, State, Zip]

Phone: [Phone Number]

Invoice #: [0000]

Date: [Date]

Application #: [00]

Bill To:

[Client Name]

[Client Address]

[City, State, Zip]

Project:

[Project Name/ID]

[Project Location]

Period To: [Date]

Description of Work	Scheduled Value	% Complete	Total Completed to Date	Previous Billing	Current Amount Due
[Phase 1 / Task Name]	\$0.00	0%	\$0.00	\$0.00	\$0.00
[Phase 2 / Task Name]	\$0.00	0%	\$0.00	\$0.00	\$0.00
[Phase 3 / Task Name]	\$0.00	0%	\$0.00	\$0.00	\$0.00
Total Contract Amount:		\$0.00			
Total Completed to Date:		\$0.00			

Less Retainage ([0]%):	(\$0.00)
Less Previous Payments:	(\$0.00)
Total Amount Due:	\$0.00

Contractor Certification: I certify that the work covered by this application has been completed in accordance with the contract documents.

Signature: _____ Date: _____