

# PROGRESS BILLING INVOICE

Company Name  
Address Line 1  
City, State, Zip

Invoice #: \_\_\_\_\_  
Date: \_\_\_\_\_  
Period Ending: \_\_\_\_\_

## BILL TO:

Client Name  
Project Name/Number  
Client Address

## CONTRACT SUMMARY:

Original Contract: \$ \_\_\_\_\_  
Approved Changes: \$ \_\_\_\_\_  
Revised Total: \$ \_\_\_\_\_

Item #	Description	Unit	Unit Price	Scheduled Qty	Work Completed		Total Value	% Done
					Prev Qty	This Period		

Total Completed to Date: \$ \_\_\_\_\_

Less Retainage (\_\_\_\_ %): \$ \_\_\_\_\_

Less Previous Payments: \$ \_\_\_\_\_

**CURRENT AMOUNT DUE:** \$ \_\_\_\_\_

Authorized Signature / Date