

INTERIM INVOICE

[Company Name]
[Address Line 1]
[City, State, Zip]
[License #]

Invoice #: _____
Date: _____
Period Ending: _____
Application #: _____

BILL TO:

[Client Name]
[Project Address]
[City, State, Zip]
PROJECT DETAILS:

Project Name: _____
Contract Date: _____
PO Number: _____

Description of Work / Line Item	Scheduled Value	% Complete	Work to Date
General Requirements / Mobilization	\$	%	\$
Demolition / Site Prep	\$	%	\$
Framing & Structural	\$	%	\$
Plumbing / Electrical / HVAC	\$	%	\$
Finishes / Cabinetry	\$	%	\$

Description of Work / Line Item	Scheduled Value	% Complete	Work to Date
Approved Change Orders	\$	%	\$

Total Work Completed: \$

Less Retainage ([]%): (\$)

Less Previous Payments: (\$)

CURRENT AMOUNT DUE: \$

Notes: All work performed in accordance with the original contract documents.

Payment Terms: Net [30] days. Please make checks payable to [Company Name].