INTERIM INVOICE

Invoice #: ___________

Date: ___________

[Subcontractor Name]

[Address Line 1]

[Tax ID / Business No.]

TO (Main Contractor):

[Company Name]
[Project Manager Name]
[Project Address]

PROJECT DETAILS:

Project Name: ___________
Contract No: ___________
Period Ending: ___________

DESCRIPTION OF WORKS / COST CODE	SCHEDULED VALUE	% COMPLETE	TOTAL EARNED TO DATE	PREVIOUS BILLING	CURRENT AMOUNT

Gross Amount Due:	$ ____________
Less Retention (____%):	($ ____________)

Less Previous Payments:	($ ___________)
NET TOTAL DUE:	**$ ___________**

Payment Instructions:
Bank Name: ___________ | Account Name: ___________ | Swift/Sort Code: ___________

____

Subcontractor Signature

____

Main Contractor Approval