

INTERIM INVOICE

Invoice #: _____

Date: _____

[Engineering Firm Name]

[Street Address]

[City, State, Zip]

[License Number]

CLIENT

[Client Name]

[Client Address]

[City, State, Zip]

Attn: [Project Manager]

PROJECT DETAILS

Project: [Project Name/Reference]

Project ID: [ID Number]

Billing Period: [Start Date] - [End Date]

Contract Type: [Fixed Price/Hourly]

Description of Services / Phase	Completion %	Contract Value	Amount
[Phase Name: e.g., Schematic Design]	____%	\$ _____	\$ _____
[Phase Name: e.g., Construction Documents]	____%	\$ _____	\$ _____
[Reimbursable Expenses / Other]	-	-	\$ _____

Total Earned to Date: \$ _____

Less Previous Billings: (\$ _____)

Retention (____%): (\$ _____)

Current Amount Due: \$ _____

Payment Terms: Net [30] Days. Please make checks payable to [Firm Name].

Wire Transfer Details: Bank: [Name] | Account: [Number] | Routing: [Number]

Thank you for your business.