INTERIM PROGRESS PAYMENT INVOICE

Invoice #: _____
Date: _____
Application #: _____

Contractor / Vendor

_____
_____
_____

Client / Project Owner

_____
_____
_____

Project Details

Project Name: _____
Contract Number: _____
Period Ending: _____

Description of Work / Phase	Contract Amount	% Complete	Total Earned

Total Earned to Date: $ _____

Less Retention (____%):	($ _____)
Less Previous Payments:	($ _____)
CURRENT AMOUNT DUE:	$ _____

Contractor Authorized Signature

Project Manager / Architect Approval

Notes: Payment terms are Net ___ days. Please include the invoice number on your remittance.