

INVOICE

Interim Progress Payment

Invoice #: _____

Date: _____

Period Ending: _____

FROM (Subcontractor):

Tax ID: _____

TO (General Contractor):

Project: _____

Description of Work	Scheduled Value	% Complete	Total to Date
_____	\$ _____	% _____	\$ _____
_____	\$ _____	% _____	\$ _____
_____	\$ _____	% _____	\$ _____

Total Completed to Date	\$ _____
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Less Previous Payments	_____ (\$)
Less Retainage (____%)	_____ (\$)
CURRENT AMOUNT DUE	\$ _____

Certification: I hereby certify that the work performed and materials supplied to date are in accordance with the contract documents.

Authorized Signature

Date