

[ARCHITECTURAL FIRM NAME]

[Address Line 1]
[City, State, Zip]
[Email / Phone]

INTERIM INVOICE

Invoice #: [000]
Date: [Date]
Project ID: [Project-ID]

CLIENT

[Client Name]
[Property Address]
[Mailing Address, if different]

PROJECT DESCRIPTION

[Brief description of residential project, e.g., "Smith Residence Renovation"]

PHASE / SERVICE DESCRIPTION	% COMPLETE	CONTRACT AMOUNT	AMOUNT DUE
Schematic Design	[0]%	\$0.00	\$0.00
Design Development	[0]%	\$0.00	\$0.00
Construction Documentation (Interim)	[0]%	\$0.00	\$0.00

PHASE / SERVICE DESCRIPTION	% COMPLETE	CONTRACT AMOUNT	AMOUNT DUE
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Reimbursable Expenses (Printing/Travel)	-	-	\$0.00
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Subtotal: \$0.00
Less Previous Payments: (\$0.00)
Total Balance Due: \$0.00

Notes: Payments are due within [Number] days. Please make checks payable to "[Firm Name]".

Thank you for the opportunity to work on your home.