

INTERIM STATEMENT

Invoice #: _____
Date: _____

[Company Name]
[Street Address]
[City, State, Zip]
[Phone / Email]

CLIENT:
[Client Name]
[Client Address]
[City, State, Zip]
PROJECT:
[Project Name/ID]
[Project Location]
Application Period: [Start Date] - [End Date]

Description of Work / Division	Scheduled Value	Work Completed	%	Total
[Item Description]	\$	\$	%	\$
[Item Description]	\$	\$	%	\$
[Item Description]	\$	\$	%	\$

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

Notes:

1. Payments are due within [Number] days of receipt.
2. All work performed according to contract specifications.
3. Lien waivers attached where applicable.