

PROGRESS BILLING

Invoice #: _____

Date: _____

[COMPANY NAME]
 [Address Line 1]
 [City, State, Zip]
 [Tax ID / Business Number]

BILL TO:

[Client Name]

[Client Address]

[Project Name/ID]

PROJECT DETAILS:

Application No: _____

Period To: _____

Contract Date: _____

DESCRIPTION OF WORK	SCHEDULED VALUE	% COMPLETE	TOTAL COMPLETED TO DATE	PREVIOUS APPLICATIONS	THIS PERIOD
[Phase/Task Description]	\$	%	\$	\$	\$
[Phase/Task Description]	\$	%	\$	\$	\$
Stored Materials	\$	-	\$	\$	\$
1. ORIGINAL CONTRACT SUM					\$
2. NET CHANGE BY CHANGE ORDERS					\$
3. CONTRACT SUM TO DATE (1 + 2)					\$
4. TOTAL COMPLETED & STORED TO DATE					\$

5. RETAINAGE (____%)	(\$)
6. TOTAL EARNED LESS RETAINAGE (4 - 5)	\$
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT	(\$)
8. CURRENT PAYMENT DUE	\$
9. BALANCE TO FINISH, PLUS RETAINAGE (3 - 6)	\$

Contractor Signature / Date

Architect/Owner Approval / Date

Terms: [Payment Terms, e.g., Net 30]. Please make checks payable to [Company Name].