

[FIRM NAME]

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

PROGRESS INVOICE

Invoice #: [0000]
Date: [Date]
Project Reference: [Project ID]

BILL TO:

[Client Name]
[Client Address]
[Client Contact Email]

ENGAGEMENT:

[Service Title - e.g., FY2023 Audit]
Contract Terms: [Net 30]

DESCRIPTION OF SERVICES / MILESTONE	CONTRACT TOTAL	% COMPLETE	PREVIOUSLY BILLED	CURRENT AMOUNT
[Phase 1: Planning & Risk Assessment]	\$0.00	0%	\$0.00	\$0.00
[Phase 2: Fieldwork & Testing]	\$0.00	0%	\$0.00	\$0.00
[Phase 3: Final Reporting]	\$0.00	0%	\$0.00	\$0.00
Total Contract Value:				\$0.00

Less Prior Billings: (\$0.00)

TOTAL AMOUNT DUE: \$0.00

Payment Instructions: Please make checks payable to "[Firm Name]" or utilize our online portal at [URL].

Thank you for your business.