

[FIRM NAME]

[Address Line 1]
[Address Line 2]
[Email/Phone]

INTERIM INVOICE

Invoice #: [0000]
Date: [Date]
Project: [Project Name]

CLIENT

[Client Name]
[Client Address Line 1]
[Client Address Line 2]

PROJECT PHASE

[e.g., Schematic Design / Procurement]

Description of Services/Items	Qty/Hrs	Rate	Amount
[Service Description]	0.0	\$0.00	\$0.00
[Service Description]	0.0	\$0.00	\$0.00
[Materials/Reimbursable Expense]	1	\$0.00	\$0.00

Subtotal: \$0.00
Tax: \$0.00
Less Retainer Applied: (\$0.00)
Amount Due: \$0.00

PAYMENT TERMS

Due within [Number] days. Please make checks payable to **[Firm Name]** or contact us for wire instructions.