

MUNICIPAL INFRASTRUCTURE INVOICE

Invoice #: [0000]

Date: [YYYY-MM-DD]

[Contracting Firm Name]

[Street Address]

[City, State, Zip]

[Tax ID/VAT Number]

CLIENT / MUNICIPALITY

[City/Department Name]

[Department Representative]

[Office Address]

[City, State, Zip]

PROJECT INFORMATION

Project Name: [Infrastructure Project Title]

Contract ID: [Project-ID-000]

Purchase Order: [PO-000000]

Billing Period: [Start Date] - [End Date]

Item / Phase Description	Unit	Qty	Unit Price	Total
[Mobilization / Site Preparation]	Lump Sum	1	\$0.00	\$0.00
[Material Procurement - Description]	Units	0	\$0.00	\$0.00
[Labor Hours - Specialized/Technical]	Hours	0	\$0.00	\$0.00
[Equipment Rental / Heavy Machinery]	Days	0	\$0.00	\$0.00

Subtotal: \$0.00

Retention (0%): (\$0.00)

Tax/VAT (0%): \$0.00

Amount Due: \$0.00

Payment Terms: Net [30] Days. Please include Contract ID on all remittances.

Wire Transfer Info: [Bank Name] | **Routing:** [000000000] | **Account:** [0000000000]

Certified payroll and compliance documents attached for this billing cycle.