

INVOICE

[Contractor Name]
[Address Line 1]
[City, State, Zip]
License #: [Number]

Invoice #: [0000]
Date: [MM/DD/YYYY]
Period: [Start] - [End]

CLIENT / PROJECT OWNER

[Agency/Client Name]
[Contact Name]
[Project Address]

PROJECT DETAILS

Project Name: [Name]
Contract #: [Number]
PW Determination #: [DIR/DBRA ID]

Work Classification	Total Hours	Basic Hourly Rate	Fringe Benefits	Total Rate	Total
[e.g., Journeyman Electrician]	[0.00]	[\$[0.00]]	[\$[0.00]]	[\$[0.00]]	[\$[0.00]]
[e.g., Apprentice Carpenter]	[0.00]	[\$[0.00]]	[\$[0.00]]	[\$[0.00]]	[\$[0.00]]
				Labor Subtotal	[\$[0.00]]
				Materials / Equipment	[\$[0.00]]

Subtotal: \$[0.00]

Tax: \$[0.00]

Total Amount Due: \$[0.00]

COMPLIANCE CERTIFICATION

I hereby certify that the workers listed above have been paid no less than the prevailing wage rates as determined by the applicable Department of Labor or State Agency for the project location and classification of work performed. Certified Payroll Reports for this period are attached or have been submitted via [System Name].

Authorized Signature / Date

Terms: [Net 30] | Please make checks payable to [Contractor Name]