

PROGRESS BILLING

Company Name: _____

Address: _____

Invoice #: _____

Date: _____

Application #: _____

TO (CLIENT):

PROJECT:

Period To: _____

DESCRIPTION OF WORK	SCHEDULED VALUE	PREV. COMPLETED	THIS PERIOD	TOTAL COMPLETED	%	BALANCE

Total Completed to Date: \$ _____

Less Previous Certificates: \$ _____

Less Retainage (____%): \$ _____

CURRENT PAYMENT DUE: \$ _____

Contractor Signature: _____ **Date:** _____

Architect/Owner Signature: _____ **Date:** _____