PROGRESS BILLING

Contractor Name
Address Line 1
City, State, Zip

Invoice #: _____
Date: _____
Application #: _____

Project Info:
Project Name: _____
Project Location: _____
Contract Date: _____
Bill To:
Client Name: _____
Client Address: _____
Owner Representative: _____

Description of Work	Scheduled Value	Previous Work	Work This Period	Materials Stored	Total Completed	%	Balance
General Requirements	$	$	$	$	$	%	$
Site Construction	$	$	$	$	$	%	$
Concrete / Masonry	$	$	$	$	$	%	$
Mechanical / Electrical	$	$	$	$	$	%	$

Total Contract Amount: $ 0.00

Total Completed to Date:	$ 0.00
Less Retainage (__%):	($ 0.00)
Less Previous Payments:	($ 0.00)
CURRENT PAYMENT DUE:	**$ 0.00**

The undersigned contractor certifies that the work covered by this application has been completed in accordance with the contract documents, and that all previous payments have been applied to discharge obligations for work and materials.

Contractor Signature / Date

Architect/Owner Approval / Date