

PROGRESS BILLING INVOICE

Company Name: _____
Project Name: _____
Project Location: _____

Invoice #: _____
Date: _____
Period To: _____
Application #: _____

TO (Owner/Client):

FROM (Contractor):

Description of Values	Amount
1. Original Contract Sum	\$ _____
2. Net Change by Change Orders	\$ _____
3. Contract Sum to Date (Line 1 + 2)	\$ _____
4. Total Completed & Stored to Date	\$ _____
5. Retainage (____% of Completed Work)	\$ _____
6. Total Earned Less Retainage (Line 4 - 5)	\$ _____
7. Less Previous Certificates for Payment	\$ _____

Description of Values	Amount
8. CURRENT PAYMENT DUE	\$ _____
9. Balance to Finish, Including Retainage	\$ _____

Contractor Certification:

The undersigned Contractor certifies that to the best of their knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents.

Authorized Signature / Date

Architect/Owner Approval:

In accordance with the Contract Documents, based on on-site observations, the Architect/Owner certifies that the Work has progressed as indicated and the Contractor is entitled to payment.

Authorized Signature / Date