PROGRESS BILLING INVOICE

Subcontractor: [Name]
[Address]
[Phone/Email]

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

TO (General Contractor):
[Company Name]
[Project Manager]
[Address]
PROJECT:
[Project Name/Number]
[Project Address]
[Contract Number]

DESCRIPTION OF WORK	SCHEDULED VALUE	WORK COMPLETED (PRIOR)	WORK COMPLETED (THIS PERIOD)	MATERIALS STORED	TOTAL COMPLETED & STORED	%	BALANCE TO FINISH
TOTALS	**$**	**$**	**$**	**$**	**$**	**%**	**$**

Original Contract Sum	$
Net Change by Change Orders	$
Contract Sum to Date	$
Total Completed & Stored to Date	$

Less Retainage (___%)	($)
Total Earned Less Retainage	$
Less Previous Certificates for Payment	($)
CURRENT PAYMENT DUE	**$**

Subcontractor Certification:
The undersigned subcontractor 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.

By: _____ (Signature) Date: _____