

PROGRESS BILLING INVOICE

Invoice #: _____

Date: _____

[Subcontractor Business Name]

[Address Line 1]

[City, State, Zip]

[Phone / Email]

BILL TO (General Contractor)

[Company Name]

[Contact Person]

[Project Name / Number]

PROJECT DETAILS

Period From: _____

Period To: _____

Application #: _____

Description of Work	Scheduled Value	Previous Work	This Period	Total to Date	% Comp	Balance
[Phase Name]	\$	\$	\$	\$	%	\$
[Phase Name]	\$	\$	\$	\$	%	\$
TOTALS	\$	\$	\$	\$	%	\$

Total Completed to Date: \$ _____

Less Retainage ([]%): (\$ _____)

Less Previous Payments: (\$ _____)

CURRENT PAYMENT DUE:

\$ _____

I certify that the work described above has been completed in accordance with the contract documents.

Subcontractor Authorized Signature

Date