INVOICE

[Firm Name]
[Address Line 1]
[City, State, Zip]

Date: [Date]
Invoice #: [00000]
Project #: [Project Number]

CLIENT / BILL TO:

[Client Name]
[Company Name]
[Client Address]
[Email/Phone]

PROJECT DETAILS:

[Project Title]
[Project Address]
Phase: Construction Documentation

DESCRIPTION OF SERVICES	HOURS / %	RATE	TOTAL
Architectural Floor Plans & Elevations	-	-	$0.00
Structural Coordination & Detailing	-	-	$0.00
MEP Systems Integration	-	-	$0.00
Specifications & Material Schedules	-	-	$0.00
Reimbursable Expenses (Printing/Delivery)	-	-	$0.00

Subtotal: $0.00
Tax: $0.00
Amount Due: $0.00

Payment Terms: Net [30] Days. Please make checks payable to [Firm Name].
Notes: This invoice covers services rendered during the Construction Documentation phase as per the Professional Services Agreement.