

PROGRESS BILLING

Contractor: _____

Address: _____

Invoice #: _____

Date: _____

Application #: _____

Client: _____

Project: _____

Billing Period: _____

Contract Date: _____

Description of Work	Scheduled Value	Previous Work	This Period	Total Completed	%	Balance to Finish
_____	\$	\$	\$	\$	%	\$
_____	\$	\$	\$	\$	%	\$
_____	\$	\$	\$	\$	%	\$
TOTALS	\$	\$	\$	\$	%	\$

Total Completed to Date: \$ _____

Less Retainage (____ %): (\$ _____)

Total Earned Less Retainage: \$ _____

Less Previous Payments: (\$ _____)

CURRENT PAYMENT DUE: \$ _____

Certification: I hereby certify that the work covered by this application has been completed in accordance with the contract documents.

Signature: _____ Date: _____