

INVOICE

[Architectural Firm Name]
[Registration/License Number]

[Street Address]
[City, State, Zip]
[Email/Phone]

BILL TO:

[Civic Agency/Department]
[Contact Person]
[Government Address]

INVOICE #: [00000]
DATE: [MM/DD/YYYY]
PROJECT ID: [Civic-Ref-000]

PROJECT: [PUBLIC BUILDING NAME / LOCATION]

| PHASE / SERVICE DESCRIPTION | HOURS / QTY | RATE | AMOUNT |
|--|-------------|------|--------|
| Schematic Design Phase | - | - | \$0.00 |
| Design Development Phase | - | - | \$0.00 |
| Construction Documentation | - | - | \$0.00 |
| Bidding & Negotiation Support | - | - | \$0.00 |
| Consultant Coordination (MEP/Structural) | - | - | \$0.00 |

PHASE / SERVICE DESCRIPTION

HOURS / QTY

RATE

AMOUNT

Reimbursable Expenses (Permits/Printing)

-

-

\$0.00

Subtotal: \$0.00

Tax/Levy: \$0.00

Total Due (USD): \$0.00

PAYMENT INSTRUCTIONS

Remit payment via ACH or Wire Transfer to: [Bank Name] | Account: [Number] | Routing: [Number]

Payment is due within [30] days of invoice receipt as per municipal contract terms.