PROGRESS INVOICE

Invoice No: _____

Date: _____

Application No: _____

_____

_____

Billing To: _____

Address: _____

Contact: _____

Project Name: _____

Project No: _____

Billing Period: _____

NO.	MILESTONE DESCRIPTION / PHASE	CONTRACT VALUE	% COMPLETE (PREV)	% COMPLETE (CURR)	TOTAL EARNED TO DATE	PREVIOUS BILLED	AMOUNT DUE THIS PERIOD
1							
2							
3							
4							
5							
6							

Payment Instructions / Notes:

Total Contract Value	
Total Earned to Date	
Less: Retainage (____%)	
Less: Previously Billed	
Net Amount Due	

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the work covered by this Application for Payment has been completed in accordance with the Contract Documents, and that the current payment shown herein is now due.

_____

Contractor Representative Signature / Date

_____

Client Representative Approval / Date