PROGRESS PAYMENT INVOICE

Invoice No:

Date:

Application No:

Period To:

TO (Contractor):

Company:

Contact:

Address:

Phone/Email:

PROJECT DETAILS:

Project Name:

Job Location:

Contract No:

Billing Period:

SCHEDULE OF VALUES / WORK PROGRESS

Item No.	Description of Work	Scheduled Value	Work Completed (Prev. Applications)	Work Completed (This Period)	Materials Stored (Not in Work)	Total Completed & Stored to Date	%Comp.
TOTALS							

CONTRACT SUMMARY TO DATE

1. Original Contract Sum	
2. Net Change by Change Orders (Approved)	
3. Contract Sum to Date (Line 1 + Line 2)	
4. Total Completed & Stored to Date	
5. Retainage (____ %)	
6. Total Earned Less Retainage (Line 4 less Line 5)	
7. Less Previous Progress Payments	
8. CURRENT PAYMENT DUE (Line 6 less Line 7)	
9. Balance to Finish (Including Retainage) (Line 3 less Line 6)	

The undersigned Subcontractor certifies that to the best of their knowledge, information and belief, the Work covered by this Application for Payment has been completed in accordance with the Contract Documents.

Subcontractor Signature

Date: _____

Approved for payment by the Contractor / Project Representative.

Authorized Signature

Date: _____