PROGRESS INVOICE

Invoice No:

Date:

Application No:

Billing Period:

CLIENT INFORMATION

Client Name:

Address:

Contact:

PROJECT INFORMATION

Project Name:

Project No:

Contract Ref:

PO Number:

CONTRACT STATUS SUMMARY

Original Contract Value

Net Change Orders

Total Revised Contract

TASK / PHASE DESCRIPTION	SCHEDULED VALUE	% COMP.	PRIOR BILLED	CURRENT WORK	TOTAL TO DATE	BALANCE TO FINISH

TASK / PHASE DESCRIPTION	SCHEDULED VALUE	% COMP.	PRIOR BILLED	CURRENT WORK	TOTAL TO DATE	BALANCE TO FINISH
Total						

Total Complete to Date:

Less Retainage (%):

Less Previous Payments:

Amount Due This Invoice:

Consultant Signature & Date

Client Approval Signature & Date

Thank you for your business.