

DEPOSIT & ADVANCE PAYMENT
STATEMENT

Statement No.	
Date	
Reference No.	

CUSTOMER / CLIENT INFORMATION

Name:

Address:

Contact No:

PROJECT / CONTRACT DETAILS

Project Name:

Contract Ref:

Total Value:

Terms:

DATE	RECEIPT/REF NO.	DESCRIPTION / PAYMENT TYPE	AMOUNT RECEIVED	AMOUNT APPLIED

Total Deposits & Advances	
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Less: Applied to Invoices	
Less: Refunds / Adjustments	
Remaining Balance Holding	

PREPARED BY

Date:

CLIENT ACKNOWLEDGMENT & APPROVAL

Date: