

PROVISIONAL WIP BILLING STATEMENT

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PROVISIONAL

Statement No:

Date:

CLIENT INFORMATION

Client Name:

Billing Address:

Contact Person:

PROJECT / MATTER DETAILS

Project Name:

Project Ref No:

WIP Period From:

WIP Period To:

DESCRIPTION OF WORK IN PROGRESS	HRS / QTY	RATE	ACCRUED WIP VALUE	PROVISIONAL BILL AMOUNT

Total Accrued WIP:

Less: Prior Billings:

Current Provisional Subtotal:

Tax / VAT (.....%):

**Total Provisional Amount
Due:**

NOTES / TERMS

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PREPARED BY (SIGNATURE / DATE)

CLIENT APPROVAL (SIGNATURE / DATE)