

# INVOICE

INV #: \_\_\_\_\_ DATE: \_\_\_\_\_ JOB # \_\_\_\_\_

SUBCONTRACTOR: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

JOB

NAME/ADDRESS: \_\_\_\_\_

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1. ORIGINAL CONTRACT AMOUNT: \_\_\_\_\_

2. APPROVED CHANGE ORDER: \_\_\_\_\_  
(please attach backup)

3. CONTRACT AMOUNT TO DATE: \_\_\_\_\_  
(line 1+/- line 2)

4. TOTAL COMPLETED TO DATE: \_\_\_\_\_  
LESS PREVIOUSLY INVOICED

5. AMOUNTS: \_\_\_\_\_

6. CURRENT PAYMENT DUE: \_\_\_\_\_

7. BALANCE TO FINISH: \_\_\_\_\_

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SUBMITTED BY:

\_\_\_\_\_  
Name and Title