

**Company Name**  
Address Line 1  
Address Line 2  
Email: info@company.com  
Phone: 123-456-7890

# Progress Payment Invoice

Invoice #: INV-2024-001  
Date: 2024-06-15  
Project #: PJT-1234

**Bill To:**  
Client Name  
Client Company  
Client Address Line 1  
Client Address Line 2  
Email: client@email.com

## Project Details

Description	Scheduled Value	Completed This Period	Previous Billings	Total Completed	Balance to Finish
Foundation Work	\$20,000	\$10,000	\$5,000	\$15,000	\$5,000
Framing	\$30,000	\$18,000	\$0	\$18,000	\$12,000
Roofing	\$10,000	\$4,000	\$0	\$4,000	\$6,000

## Summary

Total Completed and Stored to Date	\$37,000
Less Previous Payments	(\$5,000)
Current Payment Due	<b>\$32,000</b>
Retainage (10%)	(\$3,200)
Net Payment Due	<b>\$28,800</b>

## Notes

Please make payment within 14 days to the account provided. Contact accounts@company.com for any questions regarding this invoice.

Authorized Signature: \_\_\_\_\_  
Date: \_\_\_\_\_