

INVOICE

Your Company Name
123 Some Street, Suite 400
Anycity, CA 98765
212 • 123-4567 • Fax 212 • 765-4321

Invoice Number: **0003004**
Dated: **Oct 03, 00**
Project Number: **SAMPLE.04**

TO: Really Good Customer
456 Easy Street, Suite 800
SomeCity, CA 98521

Initial Value: \$17,750.00
Amendments: 12,100.00
Reimbursables: 6,750.00
Total: \$36,600.00

Refer To:
P.O. # PAD0052

Attn: **Accounts Payable**

Project:	Sample Project Name - 04	Mar 1, 00	For the Period To	Mar 31, 00
	PROFESSIONAL SERVICES	Units	Rate	Amount
	CONSULTANTS			
	Structural Engineer	5,000.00	0.15	5,750.00

<i>Subtotal</i>	5,750.00
<i>Adjustments</i>	0.00
Services Subtotal	5,750.00

INVOICE TOTAL **\$5,750.00**

Account Summary:

Total Outstanding Invoices: \$0.00
Received This Billing Period: 0.00
New Balance - Including This Month: **\$5,750.00**

Current: \$5,750.00 | 31-60 Days: \$0.00 | 61-90 Days: \$0.00 | >90 Days: \$0.00