

## Application for Payment and Invoice

<b>To:</b> _____ _____ _____	<b>Contract No.:</b> _____ <b>Delivery Order No.:</b> _____ <b>Invoice No.:</b> _____ <b>Invoice Submitted for Period Ending:</b> _____ <b>Title of Project:</b> _____
<b>From:</b> _____ (Contractors name - must be same as on the contract) <b>Address:</b> _____ _____ _____	<b>POC to notify if questions:</b> <b>Name:</b> _____ <b>Telephone:</b> _____ <b>E-Mail:</b> _____

<b>A. Original Contract Amount</b> <b>B. Net Change of Modification(s) (+/-)</b> <b>C. Contract Sum to Date (A + B = C)</b> <b>D. % of Work Completed to Date (% Value)</b> <b>E. Total of Previous Payments</b> <b>F. Value of Work Completed this Period</b> <b>G. Subcontractor Retainage/Withholding</b> (Explain reason on reverse of this form) <b>H. Current Payment Request (F - G = H)</b>	A. \$ _____ B. \$ _____ C. \$ _____ D. \$ _____ E. \$ _____ F. \$ _____ G. \$ _____ H. \$ _____
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**Certification:**  
**I hereby certify, to the best of my knowledge and belief that--**

(1) The amount requested are only for performance in accordance with the specifications, terms, and conditions of the contract;  
 (2) Payment to subcontractors and suppliers have been made from previous payments received under the contract, and timely payments will be made from the proceeds of the payment covered by this certification, in accordance with subcontract agreements and the requirements of Chapter 39 of Title 31, United States Code;  
 (3) This request for progress payment does not include any amounts which the prime contractor intends to withhold or retain from a subcontractor or supplier in accordance with the terms and conditions of the subcontract; and  
 (4) This certification is not to be construed as final acceptance of a subcontractor's performance.

\_\_\_\_\_ (Signature) \_\_\_\_\_ (Printed/Typed Name)  
 \_\_\_\_\_ (Date) \_\_\_\_\_ (Title)

**BELOW IS FOR GOVERNMENT USE ONLY**

Payment Request	\$ _____	Payment No.:	_____
Retainage @ ____%	\$ _____		
Other Adjustments	\$ _____		
Approved Payment Amount	\$ _____		

<b>I hereby certify that the above services have been received and were accepted on</b> _____ _____ <b>Contracting Officer</b> _____ <b>Agency's Address</b> _____ _____	<b>Invoice Received at                  Designated Office</b> (Date Stamp)
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