Home Modification Loan Program

Invoice

Contractors need to supply detailed back-up documentation on their letterhead

Date:	Invoice #		
Property Owner Name_			
Address of Project:			
	Number	Street	Unit #
	City	State	Zip Code
Name of General Contr	actor:		
Mailing address:			
	Number	Street	Unit #
	City	State	Zip Code
Telephone: Work and/or Co	ell:	Fax:	E-Mail:
December of Backs 1.1		n fastlantan a tili setti ali set	ayment schedule on bid form): Please
	T	otal Project Cost listed on Bi	d Form:
		Approved Change Ord	ers (if applicable):
			f applicable):
		Total Paid To-D	ate:
		Current Payme	ent Due:
		Contractor signatu	ire
☐ First disbursement only ☐ I agree all work listed a		<u> </u>	terials before the start of work
		Homeowner(s)	
Provider Use only: □Verified by	(circle one) em	ail, phone, or mail on, 20	with homeowner prior to issuing check

_____Total Invoices Paid To Date

Provider Use only: