



## SAMPLE BILLING FORM - For Example Only

Date: \_\_\_\_\_

**SUBMIT TO:**

ACCOUNTS PAYABLE  
CITY OF WHEAT RIDGE  
7500 W. 29<sup>th</sup> Avenue  
Wheat Ridge, CO 80033

City Project Name and Number: \_\_\_\_\_

City Contact Name or Department: \_\_\_\_\_

Period of Service: \_\_\_\_\_ through \_\_\_\_\_

Summary below (see attached reports for further details)

### BASIC SERVICE

Task:	Fee Amount:	% Complete:	Fee Earned:	Prior Billing:
<b>TOTAL:</b>				

Fee earned: \$ \_\_\_\_\_

Less amount previously billed: \$ \_\_\_\_\_

Amount due: \$ \_\_\_\_\_

### ADDITIONAL SERVICES:

Amount due: \$ \_\_\_\_\_

**TOTAL AMOUNT DUE:** \$ \_\_\_\_\_

Vendor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name: \_\_\_\_\_ Title: \_\_\_\_\_

City Department approval (signature of approver): \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_