



PROJECT: \_\_\_\_\_

FROM: \_\_\_\_\_

Subcontractor Name

APPLICATION / DRAW #: \_\_\_\_\_

Subcontractor Address

PERIOD COVERED: \_\_\_\_\_

Subcontractor City, State, Zip

**For Office Use Only:**

1.	Original Contract Amount		\$ _____	\$ _____
2.	Change Orders	( +/- )	\$ _____	\$ _____
3.	Contract Total And Change Orders	( = )	\$ _____	\$ _____
4.	Backcharges	( - )	\$ _____	\$ _____
5.	Final Revised Contract Amount		\$ _____	\$ _____
6.	Amount Completed This Period		\$ _____	\$ _____
7.	Retainage This Period	( - )	\$ _____	\$ _____
8.	Backcharge This Period	( - )	\$ _____	\$ _____
9.*	Current Payment Due	( = )	\$ _____	\$ _____
10.	Value of Work Completed to Date ( ____ %)		\$ _____	\$ _____
11.	Total Retainage	( - )	\$ _____	\$ _____
12.	Total Earned Minus Retainage	( = )	\$ _____	\$ _____
13.	Backcharges to Date	( - )	\$ _____	\$ _____
14.	Total Less Retainage/Backcharges	( = )	\$ _____	\$ _____
15.	Amount Previously Applied For	( - )	\$ _____	\$ _____
16.*	Current Payment Due	( = )	\$ _____	\$ _____

\* Line 9 and line 16 must equal.

Provide a complete list of all subcontractors and suppliers who have supplied work, labor, material or equipment **during the period specified above**. All listed subcontractors & suppliers are required to submit lien waiver/releases.

- |          |          |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |

**AFFIDAVIT**

**All suppliers and subcontractors have been paid in full for the previous month with no outstanding claims or liens on this project per my subcontract agreement.**

Signed this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

Signed: \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_, by \_\_\_\_\_ as \_\_\_\_\_ of \_\_\_\_\_ who is personally known to me or who has produced \_\_\_\_\_ as identification and who did (did not ) take an oath.

Notary: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

**For Office Use Only**

Item #(s): _____	_____	_____	_____	_____	_____	_____
Amount: \$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Retainage: \$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
PM Approval: _____	Total Payment Due: _____	Total Retainage: _____				