

ATTENTION SUBCONTRACTORS:

Starting May 1, 2008 all monthly pay request must be submitted on either the attached "Statement of Contract Account" or an "AIA Form G702". It must be completed in its entirety and notarized. Either form will be acceptable to Farrior and Sons, Inc.

Thank you for your assistance.

Subcontractor: _____ Date: _____

Address: _____

City, State, & Zip: _____ Phone: _____

Job Name: _____ Contract: _____

Statement of Contract Account

- | | |
|---|----------|
| 1. Original Contract Amount | \$ _____ |
| 2. Approved Change Orders _____ (As per attached breakdown) | \$ _____ |
| 3. Adjusted Contract Amount | \$ _____ |
| 4. Value of Work Completed to Date: _____ % Complete | \$ _____ |
| 5. Materials Stored on Site | \$ _____ |
| 6. Less Amount Retained 10% | \$ _____ |
| 7. Total Less Retainage | \$ _____ |
| 8. Total Previously Certified (Deduct) | \$ _____ |
| 9. Amount Due This Request | \$ _____ |

Certificate of the Subcontractor:

I hereby certify that the work performed and the materials supplied to date, as shown on the above represent the actual value of accomplishment under the terms of the Contract (and all authorized changes thereto) between the undersigned and Farris & Sons, Inc. relating to the above referenced project.

I also certify that payments, less applicable retention, have been made through the period covered by previous payments received from the contractor, to (1) all my subcontractors (sub-subcontractors) and (2) for all materials, suppliers, and labor used in or in connection with the performance of this Contract. I further certify I have complied with Federal, State and Local tax laws, including Social Security laws and Unemployment Compensation laws and Workmen's Compensation laws insofar as applicable to the performance of this Contract.

Signature: _____ Date: _____

Title: _____

STATE OF NORTH CAROLINA
COUNTY OF _____

I, _____, a Notary Public for the aforementioned county and state, certify that

_____ personally appeared before me and signed the foregoing contract.

_____ My Commission Expires: _____

Notary Public