

SCHEDULE OF UNCOMPLETED WORK (ALL WORK- BONDED & NON BONDED - IF COST PLUS PLEASE INDICATE)

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

NAME OF CONTRACTOR

DATE AS OF:

DESCRIPTION OF JOB	STARTING DATE	COMPLETION DATE	BONDED (Yes/No)	CONTRACT PRICE (Including Approved Change Orders)	CONTRACTOR'S EST COST When Bid (Including Cost of Approved Change Orders)	TOTAL BILLED To Date Including Retainages (Explain Any Disputed Items)	TOTAL COST To Date	REMAINING Cost to Complete
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
Totals								

Contracts Completed During Last Fiscal Year or Since Last Status of Contract Report

Contract Description	Final Contract Price	Gross Profit or Loss

- DO ANY BILLINGS INCLUDE UNAPPROVED CLAIMS OR DISPUTED ITEMS?
 YES NO
- ARE ANY CONTRACTS BEHIND SCHEDULE AND SUBJECT TO PENALTY?
 YES NO

Principal's Signature

Date