



Subcontractor Payment Certification

Prime Contractor Name

Prime Contractor Vendor/Supplier Number

Contract/Purchase Order/Release Number

Monthly Estimate Number

Amount Due This Estimate

Estimated Amounts to be Paid by the Prime to Authorized Subcontractors from this Invoice

| | Subcontractor Name | Subcontractor Vendor/Supplier Number | Payment Amount |
|----|--------------------|--------------------------------------|----------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |
| 8 | | | |
| 9 | | | |
| 10 | | | |

Total Amount to be Paid to Subcontractors

(If no subcontractors will be paid this invoice, please enter \$0)

Balance Due Prime Contractor

(Amount Due this Estimate less Total Amount to be Paid to Subcontractors)

Certificate of the Contractor or his Duly Authorized Representative

To the best of my knowledge and belief, I certify that all subcontracted work referenced above has been performed and materials supplied in accordance with the terms and conditions of the above-mentioned contract. Furthermore, as prime contractor it is our intent to pay the estimated amounts to the subcontractors as shown above.

I further certify that all claims outstanding against _____ for labor, materials, and expendable equipment employed in the performance of the contract have been paid in full in accordance with the requirements of said contract.

CONTRACTOR

BY

TITLE

DATE