



126 Fern Street Santa Cruz, CA 95060
 PH (831) 425-5425 FX (831) 425-1406

Subcontractor's Application for Payment
 DUE BY THE 25TH OF EACH MONTH

Purchase Order Number (Account Code): _____
Or, Contract Number (as listed on contract): _____

Note: The billing will not be processed without one of these numbers.

From: _____
 Name and Address

Project _____

Payment Request Number: _____

Period of Pay Request ____ / ____ / ____ to ____ / ____ / ____

A. Original Contract Amount: \$ _____

B. Total Sum of Slatter Issued Change Orders: \$ _____

C. Revised Contract Amount (A +B): \$ _____

D. Percentage of work completed to date (% of C): _____ %

E. Value of work billed (completed) to date (C x D): \$ _____

F. Subtract amount previously billed (previous month's E): \$ _____

G. Amount billed this request (E - F): \$ _____

H. Subtract Retention (G x 10%) \$ _____

I. Amount due this request (G - H): \$ _____

Subcontractor Pending Change Orders:
 (Only Slatter issued change orders can be billed above)

SubCO #	CO Amt	%Comp.	\$Complete
_____	_____ x	_____ =	_____
_____	_____ x	_____ =	_____
_____	_____ x	_____ =	_____
_____	_____ x	_____ =	_____