

# GREATER ILLINOIS TITLE COMPANY

## SWORN STATEMENT OF CONTRACTOR AND SUBCONTRACTOR TO OWNER AND TO GREATER ILLINOIS TITLE COMPANY

STATE OF ILLINOIS  
COUNTY OF \_\_\_\_\_ } ss. Page \_\_\_\_\_ of \_\_\_\_\_ Pages

The affiant, \_\_\_\_\_ being first duly sworn, on oath deposes  
and says that he is \_\_\_\_\_  
of \_\_\_\_\_ that \_\_\_\_\_ has  
contract with \_\_\_\_\_, owner \_\_\_\_\_ for

on the following described premises in said County, to wit: \_\_\_\_\_  
That, for the purposes of said contract, the following persons have been contracted with, and have furnished, or are furnishing and preparing  
materials for, and have done or are doing labor on said improvement. That there is due and to become due them, respectively, the amounts set  
opposite their names for materials or labor as stated. That this statement is a full, true and complete statement of all such persons, the amounts paid  
and the amounts due or to become due to each.

1 Name and Address	2 Kind of Work	3 Amount of Contract	4 Retention (inc. Current)	5 Net of Previous Payments	6 Net Amount This Payment	7 Balance To Become Due (Inc. Retentions)
<b>TOTAL</b>						

AMOUNT OF ORIGINAL CONTRACT	\$ _____	WORK COMPLETED TO DATE	\$ _____
EXTRAS TO CONTRACT	\$ _____	LESS _____% RETAINED	\$ _____
TOTAL CONTRACT AND EXTRAS	\$ _____	NET AMOUNT EARNED	\$ _____
CREDITS TO CONTRACT	\$ _____	NET PREVIOUSLY PAID	\$ _____
ADJUSTED TOTAL CONTRACT	\$ _____	NET AMOUNT OF THIS PAYMENT	\$ _____
		BALANCE TO BECOME DUE (Inc. Retention)	\$ _____

It is understood that the total amount paid to date plus the amount requested in this application shall not exceed \_\_\_\_\_% of the cost of work completed to date.

I agree to furnish Waivers of Lien for all materials under my contract when demanded.

SIGNED \_\_\_\_\_ POSITION \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

SEAL: \_\_\_\_\_

\_\_\_\_\_  
Notary Public



The above sworn statement should be obtained by the owner before each and every payment.