



The J. Biron Agency, LLC
Your Surety Bond Professionals

Schedule of Uncompleted and Completed Work

(All work-Bonded & Unbonded — If Cost Plus, Please Indicate Up-Set Price)

Contact Information

Name of Contractor: _____

As of _____ (date)

Description of Job	Owner/CM	Contract Price (Including Approved Change Orders)	Estimated Total Cost (Including Cost of Approved Change Orders)	Total Billed to Date Including Retainage	Total Costs to Date	Total Revised Estimated Costs to Complete	Anticipated Completion Date
Totals	\$	\$	\$	\$	\$		

Contracts Completed Since Last Fiscal Closing Statement

Description of Job	Owner/CM	Final Contract Price	Total Cost	Gross Profit/Loss
Totals	\$	\$	\$	

Total Uncompleted Work \$ _____
 Total Uncompleted Work by Subs \$ _____
 Bonded \$ _____
 Unbonded \$ _____
 (Signed) _____
 (Title) _____