

ATTENTION ACCOUNTING

The following items must be submitted with each pay application and emailed to ap@compass-gc.com. They are due no later than the 20th of the month and amounts should be reasonably projected through the end of the month.

Monthly Billing Check List

- ✓ Pay Application (*Exhibit F), complete all sections including lien release section and notary. Change orders that are not fully executed should not be included in contract amount.
- ✓ Schedule of Values, completed to match pay application.
- ✓ Invoice, with amounts that match or add up to pay application.
- ✓ Subtier/Suppliers List (*Exhibit F-1), listing all subcontractors and suppliers used that month.
- ✓ *Subtier/Suppliers Lien Releases, a lien release from all subcontractors and suppliers owed more than \$1,000.00 must be completed. Compass reserves the right to joint check all subcontractors and suppliers of more than \$1,000.00 regardless of aging status.

Thank you,

COMPASS ACCOUNTING TEAM

An Excel version of the pay application and Schedule of values is available upon request.

*Exhibits F, F-1, and Subtier lien release forms can be found in your subcontract.



SUBCONTRACT EXHIBIT "F"
 SUBCONTRACTOR'S MONTHLY PROGRESS PAYMENT REQUEST & WAIVER/RELEASE OF LIEN FORM
TO GENERAL CONTRACTOR

PROJECT: _____

FROM: _____
 Address: _____
 Subcontractor: _____
 Phone _____

733 - 7th Ave Ste #212
 Kirkland, WA 98033
 Payment Request No. _____
 Period End Date _____
 Document No. _____
 Subcontract No. _____

STATEMENT OF CONTRACT AMOUNT (values are automatically populated by the Schedule of Values data):

1	Original Subcontract Amount	\$	_____	Compass USE ONLY
2	Approved Change Orders (see schedule of values)	\$	_____	
3	Total Subcontract Amount to Date	\$	_____	
4	Work Completed To Date (including change orders)	\$	_____	
	#DIV/0! of line 3			
5	Total Retention at 5%	\$	_____	
6	Total earned less Retention (subtracts line 5 from 4)	\$	_____	
7	Less Previous Applications (line 7 & 8 of prior pay appl.)	\$	_____	
8	Current Payment Due	\$	_____	
9	Balance to Finish Plus Retention	\$	_____	

CONDITIONAL RELEASE OF CLAIMS OF LIEN:

The undersigned hereby certifies that he/she has requested to be paid \$ _____ which is payment for labor, services, equipment or material furnished to the GENERAL CONTRACTOR for the month ending: _____ for this PROJECT. When the check which is issued for payment of the current request has been properly endorsed and has been paid by the Bank upon which it is drawn this document shall become effective to release Pro Tanto any Mechanics Liens, Stop Notice, or Bond Right the undersigned has on the PROJECT. The undersigned further certifies that the amount of his/her current Request For Payment represents the estimated TOTAL amount owing to him/her for labor, services, equipment or material, excluding retention, furnished to the PROJECT through and including this date: _____

UNCONDITIONAL RELEASE OF CLAIMS OF LIEN:

The undersigned hereby certifies that he/she has been paid \$ _____ which is payment for labor, services, equipment or material furnished to the GENERAL CONTRACTOR through the period ending: _____ for this PROJECT and does hereby fully and completely release and discharge any right or claim to all Mechanic's Lien, Stop Notice, Equitable Lien, and any right or claim against any labor or material or other bond against the above described PROJECT through said date. The undersigned also hereby releases and discharges the OWNER and GENERAL CONTRACTOR from any and every liability arising out of labor, service performed and/or material, supplies, or equipment furnished to the Project through said date and agrees to indemnify and defend Owner and General Contractor from and against any and all claims, demands, damages or cost, including attorney's fees, which Owner and General Contractors may incur by virtue of claimant's failure to have paid or satisfied any of such obligations or indebtedness.

X _____ Title: _____ Date: _____
 (The person signing above does hereby certify that he or she is fully authorized and empowered to execute this instrument)

State of Washington, County of _____)

On this _____ day of _____, 20____, before me personally appeared _____ to me known to be the _____ of _____ that executed the within and forgoing instrument and acknowledged said instrument for the uses and purposed therein mentioned and affirms that he is authorized to execute this instrument on behalf of aforementioned entity.

IN WITNESS HEREOF, I have herunto set my hand and affixed my official seal the day and year first written

X _____
 Notary Public in and for the State of Washington
 Residing at _____
 My Commission Expires: _____

Please complete the schedule of values and provide unconditional releases from Suppliers and Subcontractors and attach as part of this payment request.

**SUBCONTRACT EXHIBIT F-3
SCHEDULE OF VALUES**

Subcontractor:
Subcontractor:

Project:



GC Project Number:	
GC Subcontract Number:	
Payment Request No:	
Payment Period Ending:	

Contract Work

ITEM	DESCRIPTION OF WORK	COST CODE	SCHEDULED VALUE	WORK COMPLETED PREVIOUS APPLICATIONS	WORK COMPLETED THIS BILLING	TOTAL COMPLETED & STORED TO DATE	% COMPLETE	BALANCE TO FINISH	RETAINAGE
1				\$ -	\$ -	\$ -	0.0%	\$ -	\$ -
2				\$ -	\$ -	\$ -	0.0%	\$ -	\$ -
3				\$ -	\$ -	\$ -	0.0%	\$ -	\$ -
4				\$ -	\$ -	\$ -	0.0%	\$ -	\$ -
5				\$ -	\$ -	\$ -	0.0%	\$ -	\$ -
6				\$ -	\$ -	\$ -	0.0%	\$ -	\$ -
7				\$ -	\$ -	\$ -	0.0%	\$ -	\$ -
8				\$ -	\$ -	\$ -	0.0%	\$ -	\$ -
9				\$ -	\$ -	\$ -	0.0%	\$ -	\$ -
10				\$ -	\$ -	\$ -	0.0%	\$ -	\$ -
11				\$ -	\$ -	\$ -	0.0%	\$ -	\$ -
12				\$ -	\$ -	\$ -	0.0%	\$ -	\$ -
13				\$ -	\$ -	\$ -	0.0%	\$ -	\$ -
14				\$ -	\$ -	\$ -	0.0%	\$ -	\$ -
Original Contract Amount			\$ -			\$ -	0.0%	\$ -	\$ -
Total Previous Payment(s)				\$ -					
Work Completed this Billing					\$ -				

Change Orders

Change No.	DESCRIPTION OF CHANGE ORDER	COST CODE	CHANGE VALUE	WORK COMPLETED PREVIOUS APPLICATIONS	WORK COMPLETED THIS BILLING	TOTAL COMPLETED & STORED TO DATE	% COMPLETE	BALANCE TO FINISH	RETAINAGE
1				\$ -	\$ -	\$ -	0.0%	\$ -	\$ -
2				\$ -	\$ -	\$ -	0.0%	\$ -	\$ -
3				\$ -	\$ -	\$ -	0.0%	\$ -	\$ -
4				\$ -	\$ -	\$ -	0.0%	\$ -	\$ -
5				\$ -	\$ -	\$ -	0.0%	\$ -	\$ -
Approved Change Orders			\$ -			\$ -	0.0%	\$ -	\$ -
Total Previous Payment(s)				\$ -					
Change Orders Completed this Billing					\$ -				

Statement of Contract Amount

1	Original Contract Amount	\$ -
2	Approved Change Orders	\$ -
3	Total Subcontract Amount To Date	\$ -
4	Total Work Completed to Date	\$ -
5	Total Retention 5%	\$ -
6	Total Earned Less Retention	\$ -
7	Less Previous Payments	\$ -
8	Current Payment Due	\$ -
9	Balance to Finish plus Retention	\$ -

Statement of Retention

Total Retention	\$ -
Retention Requested This Application	\$ -
Retention Paid Previous Applications	\$ -
Retention Balance	\$ -

EXHIBIT "F-1"

LISTING OF SUB-TIER SUBCONTRACTORS AND SUPPLIERS DUE FUNDS ON THE PROJECT

Subcontractor: _____

Project Name: _____

Period: _____

Payment Application No. _____

Were Subcontractors or Suppliers used during the Billing Period? YES NO

If YES, **ALL** subcontractors and suppliers for this project that provided labor, materials, or any work and/or are due any payments this month, in excess of \$ 1,000, along with balances due must be listed below, even if no amounts are owing as of this billing date.

SUBCONTRACTOR NAME	CONTACT PERSON	PHONE #	AMOUNT DUE SUBCONTRACTOR INCLUDING FOR WORK THIS MONTH ON THIS JOB
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

SUPPLIER NAME	CONTACT PERSON	PHONE #	AMOUNT DUE SUPPLIER INCLUDING FOR ALL MATERIAL THIS MONTH ON THIS JOB
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I hereby certify that the above statement is complete and accurate. I further certify that no other subcontractors or suppliers have provided materials, labor or services/work in excess of \$1,000, whether under contracts, agreements, verbal or written, or under any other arrangement of any type other than those listed above, and the undersigned does hereby releases and agrees to defend Owner and Compass General Construction I, LLC from any claim or liability therefore for the period covered by the Payment Application.

BY: _____ Title: _____ Date: _____
Subcontractor's Authorized Representative (The person signing this Exhibit states that he/she has authority to sign this document).

Sub-Tier Lien Release

To:

Project:

Sub-Tier/Supplier:

Working for:

Contact Person:

Phone:

Project Manager:

Phone:

Conditional Release

The undersigned does hereby acknowledge that upon receipt of a check from _____, in the amount of \$_____ and when the check has been properly endorsed and has been paid by the bank upon which it is drawn, this document shall become effective to release pro tanto and all claims and rights of lien which the undersigned has on the above referenced project. This release covers progress payment for labor, services, equipment, materials furnished and/or claims through _____ only and does not cover any retainage or items furnished after that date. The undersigned further represents and warrants that full payment has been made, or will be made out of the progress payment made herewith to all suppliers of labor and materials (subcontractors). Before any recipient of this document relies on it, said party should verify evidence of payment to the undersigned.

I certify under penalty of perjury under the laws of the state of Washington that the above is a true and correct statement.

Signature of Authorized Corporate Officer/Partner/Owner

Title

Dated this _____ day of _____, 20____

At _____, _____

Unconditional Release

The undersigned does hereby acknowledge that the undersigned has been paid and has received progress payments in the sum of \$_____ for labor, services, equipment, and materials furnished to the above referenced project and does hereby release pro tanto any and all claims and rights of lien which the undersigned has on the above referenced project through _____ and does not cover any retainage or items furnished after that date. The undersigned further represents and warrants that full payment has been made, or will be made out of the progress payment made herewith to all suppliers of labor and materials (subcontractors).

Notice: This document waives rights unconditionally and states that you have been paid for giving up those rights. This document is enforceable against you if you sign it, even if you have not been paid. If you have not been paid, use the conditional release form

I certify under penalty of perjury under the laws of the state of Washington that the above is a true and correct statement.

Signature of Authorized Corporate Officer/Partner/Owner

Title

Dated this _____ day of _____, 20____

At _____, _____

Notary

Subscribed and sworn before me this _____ day of _____, 20____

Notary public signature: _____