

SCHEDULE OF UNCOMPLETED WORK

NAME AND ADDRESS OF CONTRACTOR									
STATUS OF UNCOMPLETED CONTRACTS AS OF									
1	2	3	4	5	6	7	8	9	10
Contract Description and Location	Start Date	Completion Date	Bonded Y/N	Job Number	Contract Price Including Approved Change Orders	Original Estimated Profit	Total Amount Billed to Date Including Retainage	Costs to Date	Estimated Cost to Complete
TOTAL									

A) Are you anticipating any projects or are you currently negotiating any jobs not listed above? _____ If yes, please explain. _____

B) Do any billings include unapproved claims or disputed items? _____ If yes, please explain. _____

CONTRACTS COMPLETED SINCE LAST REPORT

DATED _____

Contract Description or Bond Number	Contract Price Incl. Approved Extras	Original Estimated Gross Profit	Final Gross Profit

C) Do any billings include unapproved claims or disputed items? _____ If yes, please explain. _____

Signature _____