GENERAL CONTRACTOR'S DRAW REQUEST Brabazon Title Co., Inc.

Date:	Draw Number:	File Number:
State of	1	
County of	SS	
		, an authorized office or agent of the General
has entered into a contract with Owner	г,	
in connection with the construction on	the Property located at	
		reement in the sum of \$
	Contractor and the following Subcontractor	rs for the furnishing of materials or labor in the
amounts set forth below:	None of Charles	(**)
(*) Description of Work	k(per Breakdown) Name of Subcor	ntractor (**) Amount
1		
2		
3		
5		
6		
7		
8		
9		
10		
(*)Please indicate the Line Item No	from the Contractors Breekdown	Total Request
	mailed (M), picked up by general (G) or pick	ked up by sub (S)
Comments:		
General Contractor states there are no	funds due previously listed Subcontractors, e	except as shown above.
The lien waivers, if any, supp	olied by General Contractor to the Disbursin	ng Agent with this Draw Request are correct and se name appears on each. General Contractor has
no knowledge of any legal or equitable	collaboration of respective Subcontractors whose collaboration may be made to defeat the valid The General Contractor will advise all the ab-	dity of the waivers so submitted. All information ove Subcontractors which are to be paid directly
and which have not submitted waivers t waiver in a form acceptable to the Disl	through the General Contractor, that funds wi	ll be released to them upon exchange of their lien
All work performed and ma	aterial furnished conforms to the Construction	on Documents as defined in the Disbursement nt to disburse above funds as soon as these funds
are deposited with the Disbursing Age	nt.	
Subscribed and sworn to before me	GENERAL CONTI	RACTOR
this day of	, 20 By:	
Notary Public,	County. My Commission expir	res:
Owner's Certificate: This is to care entitled to payment of the an	certify that the contractor and/or the su	ubcontractors on the above draw request by the terms of the building contract.
Signed on the day of		All Owners must sign)
	, ,	- '
		(Owner)