

VERIFIED STATEMENT OF ACCOUNT

TO:

RE: (Job Description)

STATE OF FLORIDA

COUNTY OF _____

BEFORE ME, the undersigned authority, personally appeared _____, who after being duly sworn deposes and says that:

1. He/She is the _____ of _____ the lienor.
2. As of _____, 20 _____, _____, the amount due said lienor, for work done at the subject project is the sum of \$ _____.
3. The amount paid on the account to date is \$ _____.
4. The amount yet to become due is estimated to be approximately \$ _____.
5. The nature of the labor or services performed is: _____

6. The nature of the labor or services to be performed is: _____

7. A description of the materials furnished is: _____

8. A description of the materials anticipated to be furnished is: _____

The foregoing instrument was sworn to or affirmed before me this ____ of _____, 20____, by _____ who is personally known to me or who has produced _____ as identification and who did take an oath.

Prepared by: _____

NOTARY PLUBLIC, STATE OF _____

My Commission Expires: _____