

FORM A



SURETEC INFORMATION SYSTEMS, INC.

Check Request Summary

(Summary of all checks that are requested)

Date: _____

DRAW # : _____

Contractor: _____

Project: _____

Item No.	Supplier/Contractor/Vendor	Total Amount Requested	Final Payment? (CHECK ONE)		FOR SISCO USE	
			Yes	No	Adjustments	Notes
			1			
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
TOTAL						

A complete listing and explanation of outstanding or held invoices, billing claims, disputes, stop notices, lien claims, etc., with vendors, subcontractors, suppliers, etc., if any, are attached.

IF NONE, PLEASE INITIAL: _____

Payments Authorized By: _____
(Contractor's Authorized Representative)