



5979 N.W. 151ST STREET • SUITE 202 • MIAMI LAKES, FLORIDA 33014
 PHONE: 305-517-3803 • FAX: 305-328-4838
 www.altersurety.com

WORK ON HAND

CONTRACTOR NAME: _____

CONTRACTS AS OF (mm/dd/yyyy) _____

UNCOMPLETED CONTRACTS		A	B	C	D	E	F	G	
No.	JOB NAME & NUMBER	Contract Price Including Changed Orders	(D+E) Total Estimated Costs	(A-B) Estimated Gross Profit	(B-E) Cost Incurred to Date	(B-D) Estimated Cost to Complete	Billed to Date Incl. Retainage	Amount Retained to Date	Estimated Completion Date Mo/Yr
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
TOTALS									

CONTRACTS COMPLETED SINCE LAST REPORT DATED (mm/dd/yyyy) _____				
JOB NAME & NUMBER	Final Contract Price	Final Gross Profit/Loss	Gross Profit Earned in Prior Years	Gross Profit Earned This Fiscal Year
TOTALS				

ANY JOBS IN DISPUTE, DELAYED, OR HAVE PROBLEMS? YES NO

IF YES, PROVIDE COMPLETE EXPLANATION.

COMPLETED BY _____

DATE (mm/dd/yyyy) _____