

HOFFMAN CORTES CONTRACTING CO.
 1600 BALTIMORE, SUITE 102
 KANSAS CITY, MO 64108
 816-842-6170

PARTIAL AFFIDAVIT

State of _____

County of _____

_____ (Name), being duly sworn in its oath deposes and says that he/she is _____ (Title), of _____ (Subcontractor), providing _____ (Type of /Work), on the Project known as: _____ Project No. _____, that he/she is familiar with the provisions for penalties for false certification; that he/she certifies that all bills for labor, materials, services, or other things of value including, but not limited to, withholding taxes, social security taxes, unemployment taxes and fringe benefits furnished by or through them before the date of _____, 2009, under the contract with _____, (Owner) have been fully paid, settled and satisfied.

List below all Suppliers and/or Subcontractors used on entire project. A Partial Lien Waiver will be required for all listed Material Suppliers and/or Subcontractors. Partial payment will not be released without Partial Lien releases.

COMPANY NAME of your material suppliers and/or subcontractors	CONTRACT AMOUNT (if unknown list not applicable)	AMOUNT PAID TO DATE (this is a cumulative amount)	AMOUNT PAID THIS PERIOD (thru date listed above)	REMAINING BALANCE LEFT ON CONTRACT

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These are all of the Contractor's Material Suppliers and/or Subcontractors for this Project and that each of the above listed Material Suppliers and/or Subcontractors have provided this Contractor with a Partial Lien Waiver; that he/she understands that said Owner, or anyone in their behalf may and will act and rely upon this instrument in releasing any funds due or owing the said Contractor.

Mark "none" in the box if you are not using any Material Suppliers and/or Subcontractors on this project.

Dated this __ day of _____, 20 ____.

 (Contractor)
 By: _____
 Title: _____

Subscribed and sworn to before me, the undersigned Notary Public within and for the State of _____ and the County of _____, this ____ day of _____, 2009__, in the City of _____.

 Notary Public within and for said county and state:

 My Commission Expires: