



EINTERZ & EINTERZ
PREVENTING PROBLEMS | PROVIDING SOLUTIONS

**BOND CLAIM/
VERIFIED STATEMENT OF CLAIM
INFORMATION SHEET**

I. Your Company Name: _____
Address: _____
Phone No.: _____
Authorized representative and title who will sign claim notice: _____

II. Amount of claim: \$ _____

III. Contractor (or Owner) with whom client contracted: _____
Address: _____

IV. Project description (Name and address of project site):

V. Specific description of work and materials furnished by client to project:

VI. Owner of project property: _____
Address of owner: _____

VII. Surety of project property: _____
Address of surety: _____

VIII. Original contract amount: \$ _____
Changes and extras: \$ _____
Total paid to date: \$ _____
Total unpaid: \$ _____

IX. First date of work on project: _____
Last date of work on project: _____