## PAYMENT BOND CLAIM NOTICE-PUBLIC WORKS

CALIFORNIA CIVIL CODE §§8600et seq, 9550 et. seq.

Sond Principal (Owner, Direct Contractor or S			
(Name)  (Address, city, state, zip)		(Name)  (Address, city, state, zip)	
Name:			
Address:			
Relationship to the parties of the one g Furnished labor, services, equipment o		tor, supplier, describe if otherwise):eneral description:	
For the building, structure or other wor identification:	rk of improvement located at	the following address or site otherwise described	ribed sufficiently for
Address:			
Or description:			
The person or firm to whom such labor			
		to control and province and	
The contract price, which is the reasons  Amount: \$	able value of the labor, servi	ces equipment or material provided, is:	
The contract price, which is the reason.  Amount: \$  Of which sum, there remains due and u	able value of the labor, servi	ces equipment or material provided, is:  nd offsets, the sum of:	
The contract price, which is the reason.  Amount: \$  Of which sum, there remains due and u  Amount: \$	able value of the labor, servi	ces equipment or material provided, is:  nd offsets, the sum of:	
Address: The contract price, which is the reasons Amount: \$ Of which sum, there remains due and u Amount: \$ Date: (Telephone)	able value of the labor, servi	ces equipment or material provided, is:  nd offsets, the sum of:  of Claimant:  By:	
The contract price, which is the reason.  Amount: \$  Of which sum, there remains due and u  Amount: \$	able value of the labor, servi	ces equipment or material provided, is:  nd offsets, the sum of:  of Claimant:  (Firm Name)	
The contract price, which is the reason.  Amount: \$  Of which sum, there remains due and u  Amount: \$  Date:	able value of the labor, servi	ces equipment or material provided, is:  nd offsets, the sum of:  of Claimant:  By:	r Authorized Agent)
The contract price, which is the reason.  Amount: \$	able value of the labor, servi	ces equipment or material provided, is:  and offsets, the sum of:  of Claimant:  By:  (Signature of Claimant of Cl	r Authorized Agent)
The contract price, which is the reasons  Amount: \$  Of which sum, there remains due and u  Amount: \$  Date:  (Telephone)	able value of the labor, servi	ces equipment or material provided, is:  and offsets, the sum of:  of Claimant:  By:  (Signature of Claimant of Cl	r Authorized Agent)
The contract price, which is the reason.  Amount: \$	able value of the labor, servi	ces equipment or material provided, is:  nd offsets, the sum of:  of Claimant:  (Firm Name)  By:  (Signature of Claimant of Cl	er Authorized Agent)
The contract price, which is the reason.  Amount: \$	npaid, after all just credits a Name of Proof of S	ces equipment or material provided, is:  and offsets, the sum of:  Of Claimant:  By:  (Signature of Claimant of (Contractor's Lice)  ervice Affidavit  copies of the above Payment Bond Claim Notice-Publ	ense #)
The contract price, which is the reason.  Amount: \$	Proof of S  declare that I served  (names(s) and title	ces equipment or material provided, is:  and offsets, the sum of:  Of Claimant:  By:  (Signature of Claimant of (Contractor's Lice)  ervice Affidavit  copies of the above Payment Bond Claim Notice-Publ	ense #)  ic Works, (check appropriate
The contract price, which is the reason.  Amount: \$	Proof of S  declare that I served  (names(s) and title)  (ail or Overnight Delivery by an expractation.	ces equipment or material provided, is:  Ind offsets, the sum of:  Of Claimant:  (Firm Name)  By:  (Signature of Claimant of Contractor's Lice)  ervice Affidavit  copies of the above Payment Bond Claim Notice-Publics) of person served) at	ic Works, (check appropriate
The contract price, which is the reason.  Amount: \$	Proof of S  declare that I served  (names(s) and titled  (ail or Overnight Delivery by an expredate).	ces equipment or material provided, is:  nd offsets, the sum of:  Of Claimant:  (Firm Name)  By:  (Signature of Claimant of Contractor's Lice)  (Contractor's Lice)  ervice Affidavit  copies of the above Payment Bond Claim Notice-Public (s) of person served) at	ic Works, (check appropriate