485 Main Street P.O. Box 481
Lewiston, ME 04243-0481
Tel (207) 753-7300 Fax (207) 753-7310
WWW.SSASURETY.COM

WORK -ON-HAND SCHEDULE

CONTRACTOR					STATUS AS OF (DATE)		
1	2	3	4	5	6	7	8
Job Description	Owner	Contract Price Plus Change Orders	Original Estimated Cost Plus Cost of Change Orders	Total Billed to Date incl. Retainage	Total Costs (Direct) to Date	Total Revised * Estimated Cost to Complete	Estimated Completion Date

*M UST BE A NEW ESTIM A TE OF REM A INING
COSTS INCLUDING UNRECOVERABLE COSTS