

New York State Thruway Authority
P.O. Box 189
Albany, New York 12201-0189
STATEMENT OF ACCOUNT

Contract D # _____ Estimate/Invoice # _____

Table with columns: WORK, Consultant Use Only (A), Authority Use Only (B). Rows include: Total work reported on previous estimates, Work reported on this estimate, Adjustment (Authority Use Only), Executed to date, Deduct 5% retainage, Previous payments, Requested payment, Amount of this Payment, % of Agreement Complete.

A. CONSULTANT USE ONLY

State of New York)
) ss.:
County of _____)

_____, being duly sworn, deposes and says:
that he is _____ of _____
the _____, which contracted for the work described in the
foregoing application and in whose name the foregoing account is rendered against the New York State Thruway:
that the services specified in such account were in fact rendered as charged; that the prices charged are just and
reasonable and that no part of the foregoing account has been paid.

Subscribed and sworn to before me
this _____ day of _____, 20____

Notary Public
Commissioner of Deeds

Consultant Signature

B. AUTHORITY USE ONLY

I, _____, Director of _____
employed in the supervision of the work described in the attached consultant's application for payment; certify that the
services stated therein have been finished and the work properly performed in accordance with the terms of the
Agreement, and that the payment in the sum of \$_____ can be made without detriment to the interest of
the Thruway Authority, to the best of my knowledge and belief.

Director Signature

Date