

[Editable Word doc of this pdf](#)

Local Agency Name
Address



FINAL CONTRACT VOUCHER

Contractor:
Name & Address

Contract No.:
Date Certified:
Payment Number:

Original Contract Amount:
Contract Changes:
Revised Contract Amount:

Project #	Work Certified This Pay Request	Work Certified To Date	Less Amount Retained	Less Previous Payments	Amount Paid This Pay Request	Total Amount Paid to Date
SP						
Total Contract						
Percent Retained: %				Percent Complete: %		
Amount Paid This Contract Final Pay Request						

I hereby certify that a Final Examination has been made of the noted Contract, that the Contract has been completed, that the entire amount of Work Shown in this Final Voucher has been performed and the Total Value of the Work Performed in accordance with, and pursuant to, the terms of the Contract is as shown in this Final Voucher.

Approved By:

Approved By:

County/City/Project Engineer

Date

Contractor

Date