Milestone

Progress Billing Invoice

Remit

Milestone Contractors North, Inc.

To:

To:

1700 E. Main Street Griffith IN 46319

TOWN OF MUNSTER

1005 RIDGE ROAD

MUNSTER, IN 46321

Invoice #:

238744-RET

Date:

01/10/2024

Project:

EAST 45TH ST - MUNSTER

Our Contract No.

238744-NET

Payment Terms

30 DAYS

From:

To:

21300

Customer No:

For Billing Inquiries, Please Call:

Anita Chapman 312-804-5026

Amount

Customer Ref: 238744

Bill Number: 2

Project: EAST 45TH ST - MUNSTER

ORIGINAL CONTRACT

555,005.00

CHANGE ORDERS

23,194.54

CURRENT CONTRACT

578,199.54

CURRENT

BILLING THIS ESTIMATE

0.00

LESS RETAINAGE WITHHELD

0.00

ADD RETAINAGE RELEASED

57,829.67

DUE THIS ESTIMATE

57,829.67

VALUE OF WORK TO DATE

578,199.54

LESS RETAINAGE WITHHELD

0.00

TOTAL

578,199.54

LESS PREVIOUS INVOICE

520,379.59

SUB TOTAL DUE THIS ESTIMATE

57,829.67

Please Pay From This Invoice No Statement Issued

WAIVER OF LIEN

(X) Final	() Partial	(X) Payment to follow
The undersigned, having been contracted by		
(PARTIAL WAIVER) that the balance due from the Contractor is in the sum of:		

()	receipt for which is hereby acknowledged, or the payment of which has been promised as the sole and Partial Waiver of Lien is given to and for said ar of such payment	consideration of this affidavit mount, effective upon receipt
(FINAL WAIVER)		
that the balance due from the Contractor is in the sum of: FIFTY SEVEN THOUSAND EIGHT HUNDRED TWENTY NINE AND 67/100		

() (X)	receipt for which is hereby acknowledged, or the payment of which has been promised as the sole and Final Waiver of Lien is given to and for said am of such payment	
Therefore, the undersigned waives and releases unto the Owner of said premises, any and all lien or claim whatsoever on the above described property and improvements thereon on account of labor or material, or both, furnished by the undersigned thereto, and further certifies that no other party has any claims or right to lien on account of any work performed or material furnished to the undersigned for said project, and within the scope of this affidavit and waiver.		
MILESTONE CONTRACTORS. Name of Company Signature of Authorized Representative		
Witness my hand and notarial Seal, this 10th of January, 2024		
Residing in <u>Porter</u> County, State of Indiana. My commission expires <u>8/16/2031</u> Melinea A Lawson		
Notary Signatu	re Pri	nted Notary Name
	MELINDA A LAWSON NOTARY PUBLIC SEAL PORTER COUNTY. STATE OF INDIANA MY COMMISSION EXPIRES AUGUST 16, 2031 COMMISSION NUMBER NP0671680	