Contractor's Request for Payment:

Contractor Name:		7	Mark Mcdougle	Date:	7/16/2013
		161.00 y Lickly	as payment for reha	abilitation work on the	e property of venue, Napoleon Ohio 43545
R					
Partial Paym	ent#:		or	Final Payment:	X
		Total of Adjusted This Pay Less Pre Balance	Contract Price: All Change Orders: I Contract Price: I Contract Pr	\$30,921.00 \$0.00 \$30,921.00 \$12,161.00 \$18,760.00 \$0.00	
I certify that	the i	ehabilitati	ent request is correct ion work which has be		•
l have ex			e request for payment r work successfully pe		
Orace & Sid			kly	07-22- Date	2013
	and in fu	ill complia ntractor h	pilitation work at the ab ince with the Contract ias delivered all neces herefore, I authorize p	and Final Specificati sary documents and	ons. I also certify that
Mouracy/all	ov Plan	nina Orac	onization Official		22-2013
City Of Napol	inn	eur	anization Official	Date O7- Date	26-13