



6490 MARINDUSTRY PLACE
SAN DIEGO, CA 92121
858-587-1901, F: 535-3704
LICENSE #444203

SEND THIS INVOICE ALONG WITH YOUR INVOICE FOR 100% LESS RETENTION

- 1. Attach your own numbered invoice**
- 2. Attach a Conditional Final release (#3)**

Invoice Date: _____
 Your invoice number: _____
 Bycor Job#: _____
 (for BYCOR's use only)
 Cost Code: _____
 PM's Approval: _____

SUBCONTRACTOR RETENTION INVOICE FORM
 (SEND WHEN PROJECT IS 100% COMPLETE)

Project Name: _____
 Project Owner: _____
 Project Address: _____
 Name: _____
 Address: _____ Tax ID #: _____
 Phone#: _____ Email: _____ Fax #: _____

Original Subcontract Amount: _____
 Change Orders _____
 Revised Subcontract Amount: _____
 _____ 100% Percentage of Contract Complete to Date: _____

FINAL RETENTION INVOICE _____

PLEASE ATTACH IN THIS ORDER - OUR INVOICE, YOUR INVOICE FORM AND #3 RELEASE

This Invoice Completed By: _____