

Resource Business Partners, Inc.
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All Suppliers / Subcontractors Sworn Declaration

Project:

Job/Invoice#:

When returning a subcontract for _____ signature, a list of all suppliers/subcontractors is to be included for this project only.

Check the appropriate box:

We do **NOT** have suppliers or subcontractors (*signature below required*).

We **DO** have suppliers or subcontractors on this project, information requested below.

Materials Supplied/Work Performed: _____

Supplier/Subcontractor Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

\$: _____

Materials Supplied/Work Performed: _____

Supplier/Subcontractor Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

\$: _____

Materials Supplied/Work Performed: _____

Supplier/Subcontractor Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

\$: _____

Use second sheet for any additional suppliers/subcontractors

I certify, under penalty of perjury, that the above is true and correct.

(print name)

(signature)

_____, 2015