INTERIM LIEN/CLAIM WAIVER

From: <u>*</u>	_ P	Project *			
(Name of Firm Giving Release) *		*	(Project Name)	
(Business Address)	_	*	(Project Addres	35)	
(City, State, Zip Code)	_		(City, State, Zip C	Code)	
Contact Person: *	_ Project	Manager:	*		
Contact Telephone: *	Telephone:	*			
CONDITIONAL RELEASE			UNCONDITIONAL RE	LEASE	
The undersigned does hereby acknowledge that upon receipt by the undersigned of a check from (Name of Firm writing check:) *		The undersigned does hereby acknowledge that the undersigned has received progress payments in the sum of \$ for labor, services, equipment or materials furnished to the			
in the sum of \$ and when the check has been properly endorsed and has been paid by the bank upon which it was drawn, this document shall become effective to release pro tanto any and all claims and rights of lien which the undersigned has on the above referenced job. This release covers a progress payment for labor, services, equipment, materials furnished and/or claims through (date) only and does not cover any retention or items furnished after that date. Before any recipient of this document relies on it said party should verify evidence of payment to the undersigned.		above referenced job and does hereby release pro tanto any and all claims and rights of lien which the undersigned has on the above referenced job. This release covers all payment for labor services, equipment, materials furnished and/or claims to the above referenced job through (date) only and does not cover any retention or items furnished after that date. NOTICE: THIS DOCUMENT WAIVES RIGHTS UNCONDITIONALLY AND STATES THAT YOU HAVE BEEN PAID FOR GIVING UP THOSE RIGHTS. THIS DOCUMENT IS ENFORCEABLE AGAINST YOU IF YOU SIGN IT, EVEN IF YOU HAVE NOT BEEN PAID. IF YOU HAVE NOT BEEN PAID. IF YOU HAVE NOT BEEN PAID, USE A CONDITIONAL RELEASE FORM.			
I CERTIFY UNDER PENALTY OF PERJURY UNDER LAWS OF THE STATE OF OREGON THAT THE ABOVE IS A TRUE AND CORRECT STATEMENT.		I CERTIFY UNDER PENALTY OF PERJURY UNDER LAWS OF THE STATE OF OREGON THAT THE ABOVE IS A TRUE AND CORRECT STATEMENT.			
Signature:		Signature:			
(Authorized Corporate Officer/Partner/Owner)		(Authorized Corporate Officer/Partner/Owner)			
(Title)		(Title)			
Dated this day of,	20	Dated this _	day of	, 20	
at:		at:			
Subscribed and sworn before me day and year first written:	st above		and sworn before me day		
by Notary Public for *		by Notary Public	c for <u>*</u>		