

**STATEMENT OF NO WORK PERFORMED
ON PUBLIC PROJECT**

Company Name and Address:

Chambers Project # _____

Project Name: _____

Payroll Week No. _____

I hereby certify that no employee worked on the construction site of _____

During the period commencing on the ____ day of _____, 20__ and
ending on the _____ day of _____, 20__.

Signature of Authorized Person

Date

Title

Fax to 541-687-9451 or email to ap@chambers-gc.com