STATE OF	
COUNTY OF	

## FINAL SUPPLIER LIEN WAIVER

FROM:
( SUPPLIER)
ADDRESS:
PHONE NUMBER: CONTACT:
TO: FARLEY ASSOCIATES, INC. 9454 OLD BAILES ROAD INDIAN LAND, SC 29707 803-547-5727-PHONE 803-547-5738-FAX
JOB AND LOCATION:
SUBCONTRACTOR THAT PURCHASED MATERIAL:
The Undersigned hereby certifies the following:
I have been paid in full and final for all materials and/or labor supplied through the end of this project.
This affidavit releases any liens and claims on bonds for the above mentioned project.
IN WITNESS WHEREAS, the undersigned has signed and sealed this instrument this the day of, 20
COMPANY:
BY:
Subscribed and sworn to before me on the day of
Notary Public:
My Commission Expires: