

EXHIBIT G  
FINAL RECEIPT, WAIVER AND RELEASE OF CLAIMS

The undersigned hereby acknowledges receipt of payment in full on the behalf of: **Watts & Company L.L.C.** ("Contractor"), as partial payment for labor, materials, equipment and services provided by the undersigned to Contractor for the following project: **Project #** \_\_\_\_\_

**Project Name:** \_\_\_\_\_

**Project Address:** \_\_\_\_\_

The undersigned waives any and all mechanics' lien rights and/or claims it has or may have with respect to the Project, and releases and forever discharges the Oblige, General Contractor, Contractor, Bank, and/or SWEC, and their respective officers, directors, employees, sureties insurers, disbursing agents and representatives from any and all claims for payment, including but not limited to payment bond claims.

Dated this \_\_\_\_\_ day of \_\_\_\_\_ (Print company name) \_\_\_\_\_

(SEAL) By: \_\_\_\_\_ Its: \_\_\_\_\_  
Witness \_\_\_\_\_

Sworn to and subscribed by me this \_\_\_\_\_ day of \_\_\_\_\_ Notary \_\_\_\_\_

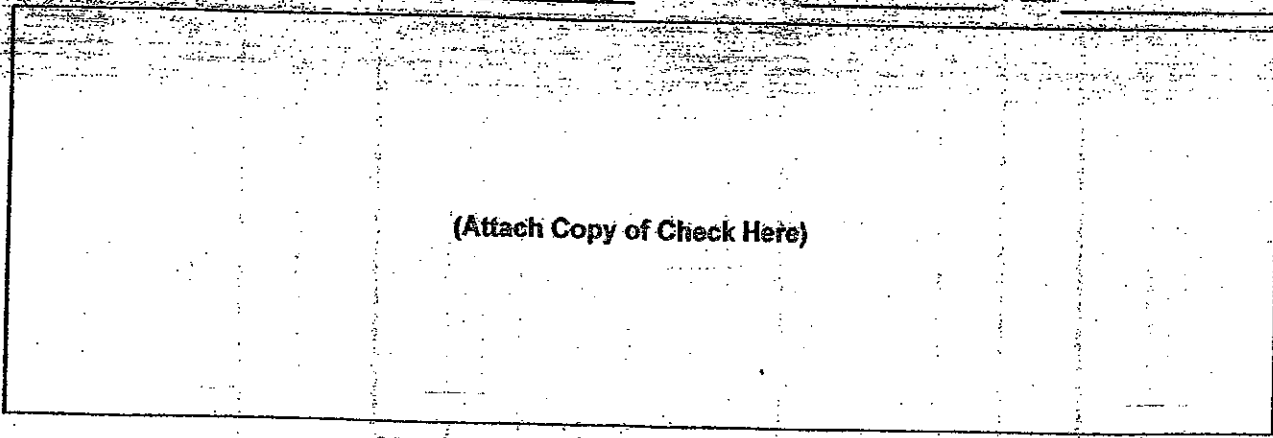
(Notary Seal) My Commission Expires: \_\_\_\_\_

Name of Owner: \_\_\_\_\_ E.I.N.# or S.S.# \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Business Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_ Mobil Phone# \_\_\_\_\_ Fax# \_\_\_\_\_



PLEASE COMPLETE AND RETURN TO:  
Watts & Company L.L.C. - 1820 E. Cavanaugh - El Reno - Oklahoma - 73036 - Fax: (405)-262-0152  
**FAILURE TO COMPLETE LIEN WAIVERS WILL DELAY FUTURE PAYMENTS**