

STATE OF HAWAII
Department of Accounting and General Services
Division of Public Works
MONTHLY ESTIMATE

FOR THE MONTH OF MARCH 2008

Date: March 19, 2008

CONTRACTOR: George M. Oye, Inc.

Contract No. 56472 []

ADDRESS: P.O. BOX 205, Kamuela, HI 96743

DAGS Job No. 11-20-2589

PROJECT TITLE: Kona Health Center Install Septic Tank

CONTRACT

Basic Contract Amount \$ 24,310.00

FOR INSPECTION BRANCH USE	
<input type="checkbox"/> SUBMITTAL REGISTER	<input type="checkbox"/> COMMENCEMENT REQUIREMENTS
DUE MONTHLY:	
<input type="checkbox"/> PROJECT SCHEDULE - INITIAL & ONGOING	
<input type="checkbox"/> DAILY REPORTS	<input type="checkbox"/> PAYROLL AFFIDAVITS
MONTHLY ESTIMATE CHECKLIST	
<input type="checkbox"/> CONTRACT NUMBER	<input type="checkbox"/> PROJECT NAME & LOCATION
<input type="checkbox"/> ALL SIGNATURES	

CHANGE ORDERS

Total Pending

Adjusted Contract Amount _____

WORK ACCOMPLISHED

		<u>Basic Contract</u>	<u>Change Order</u>	<u>Total</u>
Completed to Date	100%	\$ 24,310.00		\$ 24,310.00
Retained	3%	\$ 607.75		607.75
Additional Retention		\$ -	\$ -	\$ -
Amount Subject to Payment		\$ 23,702.25		23,702.25
Payments to Date		\$ -		
Payments Now Due		\$ 23,702.25 23,094.50	B.S.	\$ 23,702.25

Payment No. 1

Remarks: Currently in the process of applying for a change order for the extra work performed.

1. Computed and Checked by:

Brian Jenkins MAR 25 2008
3. Recommended: Project Inspector or Engineer Date:

Mike S. Flynn MAR 25 2008
4. Recommended: Area Engineer/Architect Date:

[Signature] MAR 31 2008
5. Approved: Branch Chief or District Engineer Date:

[Signature] APR -1 2008
State Public Works Administrator Date:

2. I certify that the above bill is correct, just, that payment has not been received, and all payroll affidavits have been submitted, are current, or proper deductive exclusions have been made to this request.

George M. Oye, Inc.
Name of Contractor

[Signature] / President 3/19/08
By signature / Title: Date

