

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

FOR THE MONTH OF January 2008

Date: January 15, 2008

CONTRACTOR: Site Engineering, Inc.

Contract No. 56116 [ ]

ADDRESS: 545 Kaaahi Street Honolulu, HI 96817

DAGS Job No. 11-20-2609

PROJECT TITLE: Waiakea and Keawe Health Centers Replace Waterlines

**CONTRACT**

Basic Contract Amount \$ 193,300.00

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

**CHANGE ORDERS**

Total \$ -

Adjusted Contract Amount \$ 193,300.00

**WORK ACCOMPLISHED**

		<u>Basic Contract</u>	<u>Change Order</u>	<u>Total</u>
Completed to Date	100.00%	193,300.00	-	-
Retained	0.0%	\$ -	\$ -	\$ -
Amount Subject to Payment		\$ 193,300.00	\$ -	\$ -
Payments to Date		\$ 188,467.50	\$ -	\$ -
Payments Now Due		\$ 4,832.50	\$ -	\$ -

Payment No. 4 Final

Remarks:

1. Computed and Checked by:

Thomas Michael Rogahn Sr. APR 30 2008  
 3. Recommended: Project Inspector/Engineer Date:

[Signature] MAY - 5 2008  
 4. Recommended: Area Engineer/Architect Date:

[Signature] MAY - 5 2008  
 5. Approved: Branch Chief or District Engineer Date:

[Signature] MAY - 7 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.

Site Engineering, Inc.  
 Name of Contractor

Corazon P. Taba 1/15/08  
 Corazon P. Taba, Secretary  
 By signature / Title: Date



