

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

**MONTHLY ESTIMATE**

FOR THE MONTH OF JUNE, 2015

Date: July 1, 2015

CONTRACTOR: STAN'S CONTRACTING, INC.

ADDRESS: 99-1280 WAIUA PLACE

City, State ZIP: AIEA, HI 96701

Contract No. 62722

DAGS Job No. 11-20-2684

PROJECT TITLE: DEPT. OF HEALTH WAIAKEA COMPLEX, ROOF & OTHER IMPROVEMENTS, HILO, HAWAII  
CONTRACT

Basic Contract Amount \$ 1,366,700.00

**CHANGE ORDERS**

Total \$ -

Adjusted Contract Amount \$ 1,366,700.00

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	

**WORK ACCOMPLISHED**

	Basic Contract	Change Order	Total
Completed to Date	93.76% \$ <u>1,281,392.00</u>	#DIV/0! \$ <u>-</u>	\$ <u>1,281,392.00</u>
Retained <b>REDUCED</b> [ ]	\$ <u>64,068.00</u>	\$ <u>-</u>	\$ <u>64,068.00</u>
Amount Subject to Payment	\$ <u>1,217,324.00</u>	\$ <u>-</u>	\$ <u>1,217,324.00</u>
Payments to Date	\$ <u>1,169,434.00</u>		\$ <u>1,169,434.00</u>
Payments Now Due	\$ <u>47,890.00</u>	\$ <u>-</u>	\$ <u>47,890.00</u>

Payment No. **FINAL** [ ] 9

1. Computed and Checked by

Richard Sinden 7 JULY 2015  
 3 Recommended Project Inspector or Engineer 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.

[Signature] 7-8-15  
 4 Recommended Area Engineer/Architect Date:

STAN'S CONTRACTING, INC.  
 Name of Contractor

[Signature] 07/08/15  
 5 Approved Branch Chief or District Engineer Date:

[Signature] 7/1/15  
 By signature / Title Date

The Public Works Administrator certifies that change orders have been issued and the work performed.  
[Signature] JUL 10 2015  
 State Public Works Administrator Date:



**STATE OF HAWAII**  
**DEPARTMENT OF ACCOUNTING AND GENERAL SERVICES**  
**DIVISION OF PUBLIC WORKS**  
**Monthly Payment Slip**

**PAYMENT NO.:** 9

**PROJECT TITLE:** DEPARTMENT OF HEALTH WAIAKEA COMPLEX - ROOF AND OTHER IMPROVMENTS

**BILLING MONTH:** June-15

**DAGS JOB NO.:** 1 1-20-2684

**CONTRACT NO.:** 62722

**CONTRACTOR:** STAN'S CONTRACTING INC.

**VENDOR CODE:** 2932600

<b>Original Contract Payment</b>		Suffix: 1, 2, 3, 4		
<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
03	B12-412M	\$43,206.66	\$2,520.00	\$40,686.66
04	B13-416M	\$7,203.34		\$7,203.34
<b>Totals:</b>		\$50,410.00	\$2,520.00	\$47,890.00

<b>Change Order Payment</b>		Suffix: 5		
<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
05	B13-416M	\$0.00	\$0.00	\$0.00
<b>Totals:</b>				

**Grand Total:** \$50,410.00      \$2,520.00      \$47,890.00

RECEIVED  
 2015 JUL 27 PM 12:36  
 HAWAII DISTRICT OFFICE  
 DIV. OF PUBLIC WORKS  
 D.A.G.S.

Verified By Y Xu      DATE 07/13/15

(This Section for Administrative Services Office Use Only)

Vendor Code    2932600

Cost Code      3A1

Voucher No.    SNV 7150

Verified By    [Signature]

JUL 16 2015

LV