

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

**MONTHLY ESTIMATE**

FOR THE MONTH OF SEPTEMBER, 2015

Date: October 7, 2015

CONTRACTOR: STAN'S CONTRACTING, INC.

ADDRESS: 99-1280 WAIUA PLACE

City, State ZIP: AIEA, HI 96701

Contract No. 58815 [V]

DAGS Job No. 11-27-5581

PROJECT TITLE: HI COMM. CORRECTIONAL CTR., PUNAHELE HOUSING AC SYS. IMP., HILO, HAWAII

**CONTRACT**

Basic Contract Amount \$ 733,700.00

<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 \$ 523,196.00

Adjusted Contract Amount \$ 1,256,896.00

**WORK ACCOMPLISHED**

		<u>Basic Contract</u>	<u>Change Order</u>	<u>Total</u>
Completed to Date	100.00%	\$ <u>733,700.00</u>	100.00% \$ <u>523,196.00</u>	\$ <u>1,256,896.00</u>
Retained	REDUCED [ ]	\$ <u>36,685.00</u>	\$ <u>26,157.00</u>	\$ <u>62,842.00</u>
Amount Subject to Payment		\$ <u>697,015.00</u>	\$ <u>497,039.00</u>	\$ <u>1,194,054.00</u>
Payments to Date		\$ <u>697,015.00</u>	\$ <u>493,858.00</u>	\$ <u>1,190,873.00</u>
Payments Now Due		\$ <u>-</u>	\$ <u>3,181.00</u>	\$ <u>3,181.00</u>

Payment No. FINAL [ ] 23

Remarks:

1 Computed and Checked by Marc S. Mahony 10/16/15 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.

3 Recommended [Signature] Project Inspector or Engineer Date

STAN'S CONTRACTING, INC.

4 Recommended [Signature] Area Engineer/Architect Date

Name of Contractor

5 Approved [Signature] Branch Chief or District Engineer Date

By signature / Title [Signature] Date

The Public Works Administrator certifies that change orders have been issued and the work performed

[Signature] OCT 21 2015 Date

State Public Works Administrator





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

**PAYMENT NO.:** 23

**PROJECT TITLE:** HAWAII COMMUNITY CORRECTIONAL CENTER - PUNAHELE HOUSING A/C SYSTEM IMPROVEMENTS

**BILLING MONTH:** September-15

**DAGS JOB NO.:** 1 1-27-5581

**CONTRACT NO.:** 58815

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

**VENDOR CODE:** 2932600

<b>Original Contract Payment</b>		Suffix: 1		
<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
01	B07-820M	\$0.00	\$0.00	\$0.00
<b>Totals:</b>				

<b>Change Order Payment</b>		Suffix: 2, 3, 4		
<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
04	B07-820M	\$3,348.00	\$167.00	\$3,181.00
<b>Totals:</b>		\$3,348.00	\$167.00	\$3,181.00

<b>Grand Total:</b>	\$3,348.00	\$167.00	\$3,181.00
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RECEIVED  
 2015 NOV 19 PM 12:39  
 HAWAII DEPARTMENT OF PUBLIC WORKS  
 DIVISION OF ACCOUNTING AND GENERAL SERVICES

RECEIVED  
 OCT 22 2015  
 DIVISION OF PUBLIC WORKS  
 SERVICES OFFICE

OCT 23 2015

Verified By *[Signature]* DATE

(This Section for Administrative Services Office Use Only)

Vendor Code 2932600

Cost Code 3A1

Voucher No. *SWV 10252*

Verified By *[Signature]*

OCT 28 2015

*W*