

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

FOR THE MONTH OF NOVEMBER 2011

Date: November 28, 2011

CONTRACTOR: Calvin's Plumbing Inc.
ADDRESS: 73-4840 Kanialani Street, Building D
City, State ZIP: Kailua-Kona, Hawaii 96740
PROJECT TITLE: Hale Nani Work Release Center

Contract No. 60050 [✓]
DAGS Job No. 11-27-5622

CONTRACT

Basic Contract Amount \$ 64,635.00

FOR INSPECTION BRANCH USE	
<input type="checkbox"/> SUBMITTAL REGISTER	<input type="checkbox"/> COMMENCEMENT REQUIREMENTS
DUE MONTHLY:	<input type="checkbox"/> PROJECT SCHEDULE
<input type="checkbox"/> DAILY REPORTS	<input type="checkbox"/> PAYROLL AFFIDAVIT
MONTHLY ESTIMATE CHECKLIST	
<input type="checkbox"/> CONTRACT NUMBER	
<input type="checkbox"/> PROJECT NAME AND LOCATION	<input type="checkbox"/> ALL SIGNATURES
SPECIALTY / MISC:	
<input checked="" type="checkbox"/> PROJECT ACCEPTANCE	
<input type="checkbox"/> AIR COND & PAINT ACCT DONE	

CHANGE ORDERS

Total \$ -
Adjusted Contract Amount \$ 64,635.00

WORK ACCOMPLISHED

	<u>Basic Contract</u>	<u>Change Order</u>	<u>Total</u>
Completed to Date	100.00% \$ <u>64,635.00</u>	#DIV/0! \$ <u>-</u>	\$ <u>64,635.00</u>
Retained	REDUCED [] \$ <u>-</u>	\$ <u>-</u>	\$ <u>-</u>
Amount Subject to Payment	\$ <u>64,635.00</u>	\$ <u>-</u>	\$ <u>64,635.00</u>
Payments to Date	\$ <u>61,405.00</u>		\$ <u>61,405.00</u>
Payments Now Due	\$ <u>3,230.00</u>	\$ <u>-</u>	\$ <u>3,230.00</u>

Payment No. FINAL [x] 2
 Remarks:

1. Computed and Checked by:
Mace G. [Signature] 03/30/12
Project Inspector of Engineer
[Signature] 03/30/12
Area Engineer/Architect
[Signature] 03/30/12
Branch Chief or District Engineer
 The Public Works Administrator certifies that change orders have been issued and the work performed.
[Signature] APR - 2 2012
State Public Works Administrator

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; and least 80% of our workforce resides in Hawaii.

Calvin's Plumbing Inc.
 Name of Contractor
[Signature] 12/13/11
 By signature / Title: _____ Date

