

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

MONTHLY ESTIMATE

FOR THE MONTH OF August

Date: October 5, 2009

CONTRACTOR: Oceanic Companies, Inc.

ADDRESS: P.O. Box 790899

City, State ZIP: Kapolei, HI 96709

Contract No. 57642

DAGS Job No. 12-10-0516

PROJECT TITLE: Aloha Stadium. Stiffen Raised Concourse Bridges

CONTRACT

Basic Contract Amount \$ 713,888.00

CHANGE ORDERS

Total \$ -

Adjusted Contract Amount \$ 713,888.00

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	

<u>WORK ACCOMPLISHED</u>	<u>Basic Contract</u>	<u>Change Order</u>	<u>Total</u>
Completed to Date 100.00%	\$ <u>713,888.00</u>	\$ <u>-</u>	\$ <u>713,888.00</u>
Retained	\$ <u>42,560.00</u>	\$ <u>-</u>	\$ <u>42,560.00</u>
Amount Subject to Payment	\$ <u>671,328.00</u>	\$ <u>-</u>	\$ <u>671,328.00</u>
Payments to Date	\$ <u>571,051.00</u>	\$ <u>-</u>	\$ <u>571,051.00</u>
Payments Now Due	\$ <u>100,277.00</u>	\$ <u>-</u>	\$ <u>100,277.00</u>

Payment No. 4
 Remarks:

1. Computed and Checked by

[Signature] 10/7/09
 3. Recommended Date

[Signature] 10/7/09
 4. Recommended Date

[Signature] OCT 7 2009
 5. Approved. Branch Chief or District 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.

Oceanic Companies, Inc.
 Name of Contractor

[Signature] Project Engineer 10/5/09
 By signature / Title: Date

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

