

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

FOR THE MONTH OF APRIL 2015

Date: May 1, 2015

CONTRACTOR: ABHE & SVOBODA, INC.
 ADDRESS: 91-161 Olai Street
 City, State ZIP: Kapolei

Contract No. 63321 [✓]
 DAGS Job No. 12-10-0736 ✓

PROJECT TITLE: Aloha Stadium Health and Safety Improvements, Phase 3

CONTRACT

Basic Contract Amount \$ 12,064,418.00

FOR INSPECTION BRANCH USE	
<input checked="" type="checkbox"/> SUBMITTAL REGISTER	<input checked="" type="checkbox"/> COMMENCEMENT REQUIREMENTS
DUE MONTHLY:	
<input type="checkbox"/> DAILY REPORTS	<input checked="" type="checkbox"/> PROJECT SCHEDULE
	<input checked="" type="checkbox"/> PAYROLL AFFIDAVIT
MONTHLY ESTIMATE CHECKLIST	
<input checked="" type="checkbox"/> PROJECT NAME AND LOCATION	<input checked="" type="checkbox"/> CONTRACT NUMBER
<input type="checkbox"/> AS NEED - WASTE REDUCTION PROGRESS REPORT	<input checked="" type="checkbox"/> ALL SIGNATURES
SPECIALTY / MISC:	
<input type="checkbox"/> AIR CONDITION ACCEPTANCE	<input type="checkbox"/> PAINT ACCEPTANCE

CHANGE ORDERS

Total \$ 88,640.00

Adjusted Contract Amount \$ 12,153,058.00 ✓

WORK ACCOMPLISHED

		<u>Basic Contract</u>	<u>Change Order</u>	<u>Total</u>
Completed to Date	26.37%	\$ <u>3,181,121.00</u> ✓	34.20% \$ <u>30,318.00</u> ✓	\$ <u>3,211,439.00</u> ✓
Retained	REDUCED []	\$ <u>159,055.00</u> ✓	\$ <u>1,515.00</u> ✓	\$ <u>160,570.00</u> ✓
Amount Subject to Payment		\$ <u>3,022,066.00</u> ✓	\$ <u>28,803.00</u> ✓	\$ <u>3,050,869.00</u> ✓
Payments to Date		\$ <u>1,344,077.00</u> ✓		\$ <u>1,344,077.00</u> ✓
Payments Now Due		\$ <u>1,677,989.00</u> ✓	\$ <u>28,803.00</u> ✓	\$ <u>1,706,792.00</u> ✓

Payment No. **FINAL** [] 2

Remarks: For projects already Accepted and/or Completed, delete Statement Of Contract Time and add...	<input type="checkbox"/> Project Acceptance Date	FOR OFFICE USE ONLY
	<input type="checkbox"/> Project Completion Date	

1 Computed and Checked by

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. [] As a preferred contractor, I have submitted all apprenticeship approval forms.

[Signature] MAY 7 2015
 3 Recommended Project Inspector or Engineer Date

D. Mc MAY 7 2015
 4 Recommended Area Engineer/Architect Date

Clyde K. Kumbao MAY 7 2015
 5 Approved Branch Chief or District Engineer Date

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

[Signature] MAY 08 2015
 State Public Works Administrator Date

Abhe & Svoboda, Inc.
 Name of Contractor

[Signature] 5-5-2015
 By signature / Title: Area Manager Date

CHANGE ORDER - PRIME & SUB CONTRACTOR RETAINAGE CALCULATION

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

For the Month of: APRIL 2015

CONTRACTOR: **ABHE & SVOBODA, INC.** Contract No.: 63321
 PROJECT TITLE: Aloha Stadium Health and Safety Improvements, Phase 1 DAGS Job No.: 12-10-0736

CLOSED	PRIME CONTRACTOR	TRADE	LICENSE NO.	CHANGE ORDER AMOUNT	COMPL. TO DATE	% Cmpl	RETN %	CHANGE ORDER AMOUNT RETAINED
		ABHE & SVOBODA, INC.	General Contractor	ABC-23456	\$83,621	\$30,318	36.26%	5%

SUBCONTRACTOR	TRADE	LICENSE NO.	CHANGE ORDER SUB AMOUNT	COMPL. TO DATE	% Cmpl	RETN %	CHANGE ORDER SUB AMOUNT RETAINED
PAC Electric Co. Inc.	Electrical	C-16829	\$3,143		0.00%	10%	\$0
Simmons Steel Corp.	Reinforcing Steel	C-25707	\$1,876		0.00%	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
Total Retained from Subs			\$5,019	\$0			\$0

\$88,640 \$30,318

CHANGE ORDER CONTRACT - RETAINED FROM PRIME AND SUBS (A+B) \$1,515

I certify that the above retentions are correct for this request.

Abhe + Svoboda, Inc.
 Name of Contractor

[Signature] 5-5-15
 By Signature Date

Checked/Verified by:
JRS
 Initial - Project Inspector or Engineer

NOTE:
 Columnar totals shall be equal in dollar value to that on the Monthly Estimate Sheet

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

PAYMENT NO.: 2

PROJECT TITLE: ALOHA STADIUM - HEALTH AND SAFETY IMPROVEMENTS, PHASE 3

BILLING MONTH: April-15

DAGS JOB NO.: 1 2-10-0736

CONTRACT NO.: 63321

CONTRACTOR: ABHE & SVOBODA, INC.

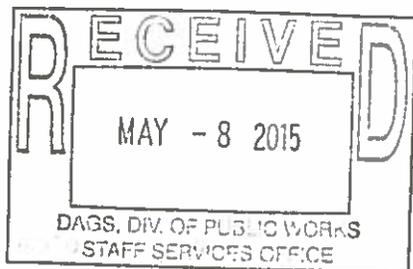
VENDOR CODE: 20339100

Original Contract Payment		Suffix: 1, 2, 3		
<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
01	B11-419M	\$1,766,304.00	\$88,315.00	\$1,677,989.00
Totals:		\$1,766,304.00	\$88,315.00	\$1,677,989.00

Change Order Payment		Suffix: 4, 5		
<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
04	B13-427M	\$30,318.00	\$1,515.00	\$28,803.00
Totals:		\$30,318.00	\$1,515.00	\$28,803.00

Grand Total:	\$1,796,622.00	\$89,830.00	\$1,706,792.00
---------------------	----------------	-------------	----------------

Verified By Y Xu DATE 05/08/15



(This Section for Administrative Services Office Use Only)

Vendor Code 20339100

Cost Code 3A1

Voucher No. SWV 5142

Verified By [Signature]

MAY 13 2015