

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

MONTHLY ESTIMATE

FOR THE MONTH OF January 2015

Date: February 1, 2016

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 checked="" type="checkbox"/> DAILY REPORTS	<input type="checkbox"/> PROJECT SCHEDULE
	<input 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 \$ 292,984.00

Adjusted Contract Amount \$ 12,357,402.00

WORK ACCOMPLISHED

		<u>Basic Contract</u>	<u>Change Order</u>	<u>Total</u>
Completed to Date	60.16%	\$ <u>7,258,350.00</u>	84.94% \$ <u>248,868.00</u>	\$ <u>7,507,218.00</u>
Retained	REDUCED [X]	\$ <u>301,607.00</u>	\$ <u>7,323.00</u>	\$ <u>308,930.00</u>
Amount Subject to Payment		\$ <u>6,956,743.00</u>	\$ <u>241,545.00</u>	\$ <u>7,198,288.00</u>
Payments to Date		\$ <u>6,935,583.00</u>	\$ <u>224,209.00</u>	\$ <u>7,159,792.00</u>
Payments Now Due		\$ <u>21,160.00</u>	\$ <u>17,336.00</u>	\$ <u>38,496.00</u>

Payment No. FINAL [] 11

Remarks: For projects already Accepted and/or Completed, delete Statement Of Contract Time and add..	FOR OFFICE USE ONLY
	<input type="checkbox"/> Project Acceptance Date <input type="checkbox"/> Project Completion 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; and least 80% of our workforce resides in Hawaii. [] As a preferred contractor, I have submitted all apprenticeship approval forms.

1. Computed and Checked by:

[Signature] FEB 18 2016
 3. Recommended: Project Inspector or Engineer Date:

[Signature] FEB 18 2016
 4. Recommended: Area Engineer/Architect Date:

[Signature] FEB 18 2016
 5. Approved: Branch Chief or District Engineer Date:

The Public Works Administrator certifies that change orders have been issued and the work performed.
[Signature] FEB 18 2016
 State Public Works Administrator Date:

Abhe & Svoboda, Inc.
 Name of Contractor

[Signature] 2-16-16
 By signature / Title: Area Manager Date:

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

PAYMENT NO.: 11

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

BILLING MONTH: January-16

DAGS JOB NO.: 1 2-10-0736

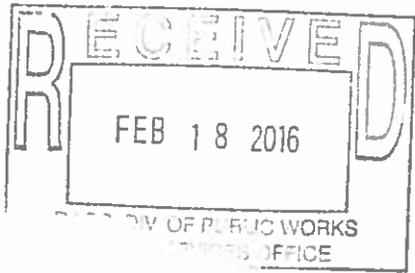
CONTRACT NO.: 63321

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>
02	B12-427M	\$21,160.00		\$21,160.00
Totals:		\$21,160.00		\$21,160.00
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	\$18,807.00	\$1,471.00	\$17,336.00
Totals:		\$18,807.00	\$1,471.00	\$17,336.00
Grand Total:		\$39,967.00	\$1,471.00	\$38,496.00

Verified By Y Xu FEB 18 2016
DATE



(This Section for Administrative Services Office Use Only)

Vendor Code 20339100

Cost Code 3A1

Voucher No. 2196 N30

Verified By Pr FEB 23 2016