

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

FOR THE MONTH OF April 2016

Date: May 2, 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

<b>FOR INSPECTION BRANCH USE</b>	
<input checked="" type="checkbox"/> SUBMITTAL REGISTER	<input checked="" type="checkbox"/> COMMENCEMENT REQUIREMENTS
<b>DUE MONTHLY:</b>	
<input checked="" type="checkbox"/> DAILY REPORTS	<input checked="" type="checkbox"/> PROJECT SCHEDULE
<input checked="" type="checkbox"/> MONTHLY ESTIMATE CHECKLIST	<input checked="" type="checkbox"/> PAYROLL AFFIDAVIT
<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
<b>SPECIALTY / MISC:</b>	
<input type="checkbox"/> AIR CONDITION ACCEPTANCE	<input type="checkbox"/> PAINT ACCEPTANCE

**CHANGE ORDERS**

Total \$ 624,562.00

Adjusted Contract Amount \$ 12,688,980.00

**WORK ACCOMPLISHED**

		<u>Basic Contract</u>	<u>Change Order</u>	<u>Total</u>
Completed to Date	75.21%	\$ <u>9,073,217.00</u>	69.04% \$ <u>431,226.00</u>	\$ <u>9,504,443.00</u>
Retained	<b>REDUCED [ X ]</b>	\$ <u>301,607.00</u>	\$ <u>15,612.00</u>	\$ <u>317,219.00</u>
Amount Subject to Payment		\$ <u>8,771,610.00</u>	\$ <u>415,614.00</u>	\$ <u>9,187,224.00</u>
Payments to Date		\$ <u>8,150,902.00</u>	\$ <u>297,892.00</u>	\$ <u>8,448,794.00</u>
Payments Now Due		\$ <u>620,708.00</u>	\$ <u>117,722.00</u>	\$ <u>738,430.00</u>

Payment No. **FINAL [ ]** 14

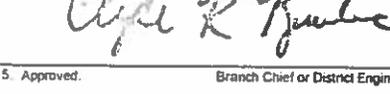
Remarks: For projects already Accepted and/or Completed, delete Statement Of Contract Time and add. <input type="checkbox"/> Project Acceptance Date <input type="checkbox"/> Project Completion Date	<b>FOR OFFICE USE ONLY</b>

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:

 MAY 9 2016  
 Recommended: Project Inspector or Engineer Date:

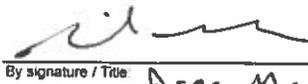
 MAY 9 2016  
 Recommended: Area Engineer/Architect Date:

 MAY 9 2016  
 Approved: Branch Chief or District Engineer Date:

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

 MAY 09 2016  
 State Public Works Administrator Date:

Abhe & Svoboda, Inc.  
 Name of Contractor

 5-5-16  
 By signature / Title: Area Manager Date:





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

**PAYMENT NO.:** 14

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

**BILLING MONTH:** April-16

**DAGS JOB NO.:** 1 2-10-0736

**CONTRACT NO.:** 63321

**CONTRACTOR:** ABHE & SVOBODA, INC.

**VENDOR CODE:** 20339100

<b>Original Contract Payment</b>		Suffix: 1, 2, 3		
<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
03	B13-427M	\$620,708.00		\$620,708.00
<b>Totals:</b>		\$620,708.00		\$620,708.00

<b>Change Order Payment</b>		Suffix: 4, 5		
<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
04	B13-427M	\$119,378.00	\$1,656.00	\$117,722.00
<b>Totals:</b>		\$119,378.00	\$1,656.00	\$117,722.00

<b>Grand Total:</b>		\$740,086.00	\$1,656.00	\$738,430.00
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*Lloyd Ogata*      5/9/2016  
Verified By      DATE

(This Section for Administrative Services Office Use Only)

Vendor Code 20339100

Cost Code 3A1

Voucher No. 5117N13

Verified By *ps*      MAY 12 2016

