

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

FOR THE MONTH OF September

Date: September 30, 2016

CONTRACTOR: INDEX BUILDERS INC.

ADDRESS: 1019 LAUIA STREET, UNIT #3

City, State ZIP: KAPOLEI, HAWAII 96707

Contract No. 64793 [1]

DAGS Job No. 12-10-0750

PROJECT TITLE: STATE CAPITOL BUILDING REPLACE UPPER ROOF CONTRACT

Basic Contract Amount \$ 6,774,499.50

FOR INSPECTION BRANCH USE	
<input checked="" type="checkbox"/> SUBMITTAL REGISTER	<input type="checkbox"/> COMMENCEMENT REQUIREMENTS
DUE MONTHLY:	
<input checked="" 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 NEEDED - 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 \$ -

Adjusted Contract Amount \$ 6,774,499.50

WORK ACCOMPLISHED

		Basic Contract	Change Order	Total
Completed to Date	20.54%	\$ <u>1,391,519.00</u> ^{00.51}	#DIV/0! \$ -	\$ <u>1,391,519.00</u> ^{00.51}
Retained	REDUCED []	\$ <u>81,026.00</u>	\$ -	\$ <u>81,026.00</u>
Amount Subject to Payment		\$ <u>1,310,493.00</u> ^{00.51}	\$ -	\$ <u>1,310,493.00</u> ^{00.51}
Payments to Date		\$ <u>849,235.27</u> ^{00.51}	\$ -	\$ <u>849,235.27</u> ^{00.51}
Payments Now Due		\$ <u>461,258.63</u> ^{00.51}	\$ -	\$ <u>461,258.63</u> ^{00.51}

Payment No. **FINAL** [] 2

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	

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] OCT 17 2016
 3 Recommended Project Inspector or Engineer Date

[Signature] OCT 17 2016
 4 Recommended Area Engineer/Architect Date

[Signature] OCT 17 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] OCT 17 2016
 State Public Works Administrator Date

INDEX BUILDERS, INC.

Name of Contractor

[Signature]
 Glenn Estacio / Project Manager
 By signature / Title: October 3, 2016
 Date

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

PAYMENT NO.: 2

PROJECT TITLE: STATE CAPITOL BUILDING - REPLACE UPPER ROOF

BILLING MONTH: September-16

DAGS JOB NO.: 1 2-10-0750

CONTRACT NO.: 64793

CONTRACTOR: INDEX BUILDERS INC.

VENDOR CODE: 28867600

Original Contract Payment Suffix: 1, 2

<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
01	B13-466M	\$494,107.00	\$32,849.00	\$461,258.00
Totals:		\$494,107.00	\$32,849.00	\$461,258.00

Change Order Payment Suffix: 3

<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
03	B14-459M	\$0.00	\$0.00	\$0.00
Totals:				

Grand Total: \$494,107.00 \$32,849.00 \$461,258.00

Lloyd Ogata 10/18/2016
Verified By DATE

(This Section for Administrative Services Office Use Only)

Vendor Code 28867600

Cost Code 3A1

Voucher No. 10209N14

Verified By *pr* OCT 24 2016

