

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

FOR THE MONTH OF October

Date: October 31, 2016

CONTRACTOR: INDEX BUILDERS INC.
ADDRESS: 1019 LAUIA STREET, UNIT #3
City, State ZIP: KAPOLEI, HAWAII 96707
PROJECT TITLE: STATE CAPITOL BUILDING REPLACE UPPER ROOF
CONTRACT

Contract No. 64793 |
 DAGS Job No. 12-10-0750

Basic Contract Amount \$ 6,774,499.50

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 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

		<u>Basic Contract</u>		<u>Change Order</u>		<u>Total</u>
Completed to Date	28.19%	\$ 1,909,660	#DIV/0!	\$ -	\$ 1,909,660	
Retained	REDUCED []	\$ 102,928		\$ -	\$ 102,928	
Amount Subject to Payment		\$ 1,806,732		\$ -	\$ 1,806,732	
Payments to Date		\$ 1,310,493		\$ -	\$ 1,310,493	
Payments Now Due		\$ 496,239		\$ -	\$ 496,239	

Payment No. **FINAL** [] 3

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	FOR OFFICE USE ONLY	

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

James G. Leitch NOV 21 2016
 3 Recommended: Project Inspector or Engineer Date:

[Signature] NOV 21 2016
 4 Recommended: Area Engineer/Architect Date:

Alfred R. Kumbur NOV 21 2016
 5 Approved: Branch Chief or District Engineer Date:

INDEX BUILDERS, INC.

Name of Contractor: _____
[Signature]
 By signature / Title: Glenn Estacio / Project Manager October 31, 2016
 Date

The Public Works Administrator certifies that change orders have been issued and the work performed.
[Signature] NOV 22 2016
 State Public Works Administrator Date:

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

PAYMENT NO.: 3

PROJECT TITLE: STATE CAPITOL BUILDING - REPLACE UPPER ROOF

BILLING MONTH: October-16

DAGS JOB NO.: 1 2-10-0750

CONTRACT NO.: 64793

CONTRACTOR: INDEX BUILDERS INC.

VENDOR CODE: 28867600

Original Contract Payment		Suffix: 1, 2		
Suffix	Fund Symbol	Amount Earned	Retainage	Amount Due
01	B13-ALDOM	\$518,141.00	\$21,902.00	\$496,239.00
Totals:		\$518,141.00	\$21,902.00	\$496,239.00

Change Order Payment		Suffix: 3		
Suffix	Fund Symbol	Amount Earned	Retainage	Amount Due
03	B14-459M	\$0.00	\$0.00	\$0.00
Totals:				

Grand Total:	\$518,141.00	\$21,902.00	\$496,239.00
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Verified By Y Xu NOV 22 2016
 DATE

(This Section for Administrative Services Office Use Only)

Vendor Code 28867600

Cost Code 3A1

Voucher No. 11218N35

Verified By ps NOV 28 2016