

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

FOR THE MONTH OF APRIL 2015

Date: April 8, 2015

CONTRACTOR: Commercial Electric, Inc.

ADDRESS: 1010 Paapu Street

City, State ZIP: Honolulu, HI 96819

Contract No. 63322 []

DAGS Job No. 12-14-7365 - WO#4

PROJECT TITLE: Hawaii State Civil Defense Disaster Warning and Communication System Devices - OAHU

CONTRACT

Basic Contract Amount \$ 1,609,769.00

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 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 \$ -

Adjusted Contract Amount \$ 1,609,769.00

WORK ACCOMPLISHED

		<u>Basic Contract</u>	<u>Change Order</u>	<u>Total</u>
Completed to Date	1.78%	\$ <u>28,584.00</u>	#DIV/0! \$ <u>-</u>	\$ <u>28,584.00</u>
Retained	REDUCED [<input type="checkbox"/>]	\$ <u>1,429.00</u>	\$ <u>-</u>	\$ <u>1,429.00</u>
Amount Subject to Payment		\$ <u>27,155.00</u>	\$ <u>-</u>	\$ <u>27,155.00</u>
Payments to Date		\$ <u>-</u>	\$ <u>-</u>	\$ <u>-</u>
Payments Now Due		\$ <u>27,155.00</u>	\$ <u>-</u>	\$ <u>27,155.00</u>

Payment No. ^{BT} 1 FINAL [] ~~2~~ REV ^{BT} []

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:

 MAY 20 2015
 3. Recommended: _____ Date: _____

 MAY 20 2015
 4. Recommended: _____ Date: _____

 MAY 20 2015
 5. Approved: _____ Date: _____

Commercial Electric, Inc.
 Name of Contractor

 MAY 14 2015
 Nick W. Teves, Jr., President
 By signature / Title: _____ Date: _____

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

 MAY 20 2015
 State Public Works Administrator _____ Date: _____

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

PAYMENT NO.: 1

PROJECT TITLE: HAWAII STATE CIVIL DEFENSE - DISASTER WARNING & COMM
SYS DEVICES, WORK ORDER 4

BILLING MONTH: April-15

DAGS JOB NO.: 1 2-14-7365

CONTRACT NO.: 63322

CONTRACTOR: COMMERCIAL ELECTRIC INC.

VENDOR CODE: 270400

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	B08-431M	\$28,584.00	\$1,429.00	\$27,155.00
Totals:		\$28,584.00	\$1,429.00	\$27,155.00

Change Order Payment		Suffix: 3		
<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
03	B11-832M	\$0.00	\$0.00	\$0.00
Totals:				

Grand Total:	\$28,584.00	\$1,429.00	\$27,155.00
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Verified By Y Xu DATE 05/21/15

(This Section for Administrative Services Office Use Only)

Vendor Code 270400

Cost Code 3A1

Voucher No. 5278N21

Verified By ms MAY 27 2015