

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

FOR THE MONTH OF May 2009

Date: May 4, 2011

CONTRACTOR: PARAMOUNT BUILDERS

ADDRESS: 2230 ALAHAO PLACE, UNIT 600 *PC*

Contract No. 57428

City, State ZIP: HONOLULU, HI 96819

DAGS Job No. 12-20-2624

PROJECT TITLE: Hawaii State Hospital Building E, F, H, & I - Door Improvements

CONTRACT

Basic Contract Amount \$ 95,687.00

FOR INSPECTION BRANCH USE	
<input type="checkbox"/> SUBMITTAL REGISTER	<input type="checkbox"/> COMMENCEMENT REQUIREMENTS
DUE MONTHLY:	
<input type="checkbox"/> PROJECT SCHEDULE - INITIAL & ONGOING	
<input type="checkbox"/> DAILY REPORTS	<input type="checkbox"/> PAYROLL AFFIDAVITS
MONTHLY ESTIMATE CHECKLIST	
<input checked="" type="checkbox"/> CONTRACT NUMBER	<input checked="" type="checkbox"/> PROJECT NAME & LOCATION
<input checked="" type="checkbox"/> ALL SIGNATURES	

CHANGE ORDERS

Total \$ -

Adjusted Contract Amount \$ 95,687.00

WORK ACCOMPLISHED

	Basic Contract	Change Order	Total
Completed to Date	100.00% \$ <u>95,687.00</u>	#DIV/0! \$ <u>-</u>	\$ <u>95,687.00</u>
Retained	\$ <u>-</u>	\$ <u>-</u>	\$ <u>-</u>
Amount Subject to Payment	\$ <u>95,687.00</u>	\$ <u>-</u>	\$ <u>95,687.00</u>
Payments to Date	\$ <u>90,373.28</u> <i>PC</i>	\$ <u>-</u>	\$ <u>90,373.28</u> <i>PC</i>
Payments Now Due	\$ <u>5,313.72</u> <i>PC</i>	\$ <u>-</u>	\$ <u>5,313.77</u>

Payment No. FINAL 2

Remarks: A.H.

\$ 5,313.78 *PC*

1. Computed and Checked by:

[Signature] 8/1/11
 3. Recommended: Project Inspector or Engineer Date:

[Signature] 8/1/11
 4. Recommended: Area Engineer/Architect Date:

[Signature] AUG - 2 2011
 5. Approved: Branch Chief or District Engineer Date:

[Signature] AUG - 2 2011
 State Public Works Administrator 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.

DKSL, LLC dba PARAMOUNT BUILDERS
 Name of Contractor

[Signature] 8/4/11
 By signature / Title: Date

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

FINAL

PAYMENT NO.: 2

PROJECT TITLE: HAWAII STATE HOSPITAL - BUILDINGS E, F, H, AND I, DOOR IMPROVEMENTS

BILLING MONTH: May-09

DAGS JOB NO.: 1 2-20-2624

CONTRACT NO.: 57428

CONTRACTOR: DKSL, LLC

VENDOR CODE: 30318000

Original Contract Payment

Suffix: 1

<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
01	B06-413M	\$0.00	(\$5,313.78)	\$5,313.78
Totals:		\$0.00	(\$5,313.78)	\$5,313.78

Change Order Payment

Suffix: 2

<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
02	B06-413M	\$0.00	\$0.00	\$0.00
Totals:		\$0.00	\$0.00	\$0.00

Grand Total: \$0.00 (\$5,313.78) \$5,313.78

Lloyd Ogata 8/2/2011
Verified By **DATE**

(This Section for Administrative Services Office Use Only)

Vendor Code 30318000

Cost Code 3A1

Voucher No. DB037N13

Verified By per 8/2/11

*450-57 10-11-09
 450-57-10-11-09*