

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

**MONTHLY ESTIMATE**

FOR THE MONTH OF MARCH 2012

Date: March 8, 2012

CONTRACTOR: Commercial Electric, Inc.

ADDRESS: 1010 Pa'apu Street

City, State ZIP: Honolulu, Hawaii 96819

Contract No. 60030 [✓]

DAGS Job No. 12-20-2642

PROJECT TITLE: Hawaii State Hospital Various Locations, Replace Transformers and Switchgear

**CONTRACT**

Basic Contract Amount \$ 760,000.00

<b>FOR INSPECTION BRANCH USE.</b>	
<input type="checkbox"/> SUBMITTAL REGISTER	<input type="checkbox"/> COMMENCEMENT REQUIREMENTS
<b>DUE MONTHLY:</b>	
<input type="checkbox"/> PROJECT SCHEDULE - INITIAL & ONGOING	
<input type="checkbox"/> DAILY REPORTS	<input type="checkbox"/> PAYROLL AFFIDAVITS
<b>MONTHLY ESTIMATE CHECKLIST</b>	
<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 \$ 760,000.00

**WORK ACCOMPLISHED**

		<u>Basic Contract</u>	<u>Change Order</u>	<u>Total</u>
Completed to Date	17.67%	\$ <u>134,315.50</u>	#DIV/0! \$ <u>-</u>	\$ <u>134,315.50</u>
Retained	<b>REDUCED</b> [ ]	\$ <u>8,485.00</u>	\$ <u>-</u>	\$ <u>8,485.00</u>
Amount Subject to Payment		\$ <u>125,830.50</u>	\$ <u>-</u>	\$ <u>125,830.50</u>
Payments to Date		\$ <u>-</u>	\$ <u>-</u>	\$ <u>-</u>
Payments Now Due		\$ <u>125,830.50</u>	\$ <u>-</u>	\$ <b><u>125,830.50</u></b>

Payment No. [ ] FINAL [ ] 1

INVOICE NO.: 0347-11 PAYMENT REQUEST NO.: 1

1. Computed and Checked by:

Carol K. H. 4/11/12

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.

3. Recommended: Paul Ce. 4/10/12 Date:

Commercial Electric, Inc.

4. Recommended: Paul Ce. 4/10/12 Date:

Name of Contractor

5. Approved: Paul Ce. 4/11/12 Date:

Nick W. Teves, Jr. 4/5/2012  
 By signature / Title: President Date

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

Paul Ce. APR 12 2012  
 State Public Works Administrator Date:

**BASIC CONTRACT - PRIME & SUB CONTRACTOR RETAINAGE CALCULATION**

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

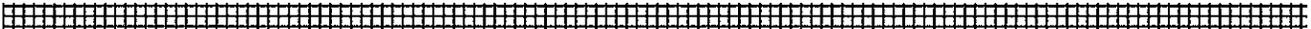
For the Month of: MARCH 2012

CONTRACTOR: **Commercial Electric, Inc.** Contract No.: **60030**  
 PROJECT TITLE: **Hawaii State Hospital Various Locations, Replace Transf** DAGS Job No.: **12-20-2642**

CLOSED	PRIME CONTRACTOR	TRADE	LICENSE NO.	BASIC CONTRACT AMOUNT	COMPL. TO DATE	% Cmpl	RETN %	CONTRACT AMOUNT RETAINED
		Commercial Electric, Inc.	General Contractor	C-07215	\$760,000	\$134,316	17.67%	5%

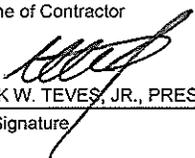


SUBCONTRACTOR	TRADE	LICENSE NO.	BASIC SUB-CONTRACT AMOUNT	COMPL. TO DATE	% Cmpl	RETN %	SUB-CONTRACT AMOUNT RETAINED
Quality General	Concrete/Masonry	ABC-13362	\$35,400	\$35,400	100.00%	5%	\$1,770
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
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					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
					#DIV/0!	10%	\$0
Total Retained from Subs							\$1,770



**BASIC CONTRACT - RETAINED FROM PRIME AND SUBS (A+B) \$8,485**

I certify that the above retentions are correct for this request.

COMMERCIAL ELECTRIC, INC.  
 Name of Contractor  
  
 NICK W. TEVES, JR., PRESIDENT  
 By Signature  
 4/5/2012  
 Date

Checked/Verified by:  
  
 Initial - Project Inspector or Engineer

NOTE:  
 Columnar totals shall be equal in dollar value to that on the Monthly Estimate Sheet

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

**PAYMENT NO.:** 1

**PROJECT TITLE:** HAWAII STATE HOSPITAL - VARIOUS LOCATIONS, REPLACE TRANSFORMERS & SWITCHGEAR

**BILLING MONTH:** March-12

**DAGS JOB NO.:** 1 2-20-2642

**CONTRACT NO.:** 60030

**CONTRACTOR:** COMMERCIAL ELECTRIC INC.

**VENDOR CODE:** 270400

<b>Original Contract Payment</b>		Suffix: 1, 3		
<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
03	B09-408M	\$134,315.50	\$8,485.00	\$125,830.50
<b>Totals:</b>		\$134,315.50	\$8,485.00	\$125,830.50

<b>Change Order Payment</b>		Suffix: 2, 4		
<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
	B09-408M	\$0.00	\$0.00	\$0.00
<b>Totals:</b>				

<b>Grand Total:</b>	\$134,315.50	\$8,485.00	\$125,830.50
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*Yingfan Xu*      04/12/2012  
 Verified By      DATE

(This Section for Administrative Services Office Use Only)

Vendor Code    270400

Cost Code        3A1

Voucher No.     4106N31

Verified By     *pr*      4/17/12