

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

FOR THE MONTH OF February 2016

Date: March 1, 2016

CONTRACTOR: Paul's Electrical Contracting, LLC

ADDRESS: 99-1400 Koaha Place

Contract No. 63386

City, State ZIP: Aiea, HI 96701

DAGS Job No. 12-20-2662

PROJECT TITLE: **HAWAII STATE HOSPITAL SYSTEM - WIDE EMERGENCY GENERATORS**

CONTRACT

Basic Contract Amount \$ 4,768,700.00

FOR INSPECTION BRANCH USE	
<input 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 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 \$ 139,937.00

Adjusted Contract Amount \$ 4,908,637.00

WORK ACCOMPLISHED

		<u>Basic Contract</u>	<u>Change Order</u>	<u>Total</u>
Completed to Date	40.97%	\$ <u>1,953,775.00</u>	79.66% \$ <u>111,481.00</u>	\$ <u>2,065,256.00</u>
Retained	REDUCED <input type="checkbox"/>	\$ <u>126,089.00</u>	\$ <u>10,257.00</u>	\$ <u>136,346.00</u>
Amount Subject to Payment		\$ <u>1,827,686.00</u>	\$ <u>101,224.00</u>	\$ <u>1,928,910.00</u>
Payments to Date		\$ <u>1,487,526.00</u>	\$ <u>101,224.00</u>	\$ <u>1,588,750.00</u>
Payments Now Due		\$ <u>340,160.00</u>	\$ <u>-</u>	\$ <u>340,160.00</u>

Payment No. **FINAL** 7

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	

¹ Computed and Checked by

Charles K. Thi MAR 14 2016
³ Recommended: Project Inspector or Engineer Date

[Signature] MAR 14 2016
⁴ Recommended: Area Engineer/Architect Date

[Signature] MAR 14 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] MAR 14 2016
 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; and least 80% of our workforce resides in Hawaii. As a preferred contractor, I have submitted all apprenticeship approval forms.

PAUL'S ELECTRICAL CONTRACTING, LLC

Name of Contractor
[Signature]
 By signature / Title MANAGER 02/26/2016
 Date

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

PAYMENT NO.: 7

PROJECT TITLE: HAWAII STATE HOSPITAL - SYSTEM-WIDE EMERGENCY GENERATORS

BILLING MONTH: February-16

DAGS JOB NO.: 1 2-20-2662

CONTRACT NO.: 63386

CONTRACTOR: PAUL'S ELECTRICAL CONTRACTING, LLC

VENDOR CODE: 30131100

Original Contract Payment		Suffix: 1, 2		
Suffix	Fund Symbol	Amount Earned	Retainage	Amount Due
01	B11-406M	\$376,852.00	\$36,692.00	\$340,160.00
Totals:		\$376,852.00	\$36,692.00	\$340,160.00

Change Order Payment		Suffix: 3		
Suffix	Fund Symbol	Amount Earned	Retainage	Amount Due
03	B11-406M	\$0.00	\$0.00	\$0.00
Totals:				

Grand Total: \$376,852.00 \$36,692.00 \$340,160.00

Verified By Y Xu DATE MAR 15 2016

(This Section for Administrative Services Office Use Only)

Vendor Code 30131100

Cost Code 3A1

Voucher No. 3185040

Verified By JL DATE MAR 18 2016

