

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

RECEIVED - DAGS
 DIV. OF PUBLIC WORKS
 2015 AUG -4 PM 12:46

FOR THE MONTH OF July 2015

Date: July 31, 2015

CONTRACTOR: Allied Pacific Builders, Inc.
 ADDRESS: 94-260 Pupuole Street
 City, State ZIP: Waipahu, HI 96797
 PROJECT TITLE: Leeward Health Center - Repair Spalling
CONTRACT

Contract No. 62169 ✓
 DAGS Job No. 12-20-2681

Basic Contract Amount \$ 877,810.00



CHANGE ORDERS

Total \$ 129,855.00

Adjusted Contract Amount \$ 1,007,665.00

WORK ACCOMPLISHED

		<u>Basic Contract</u>	<u>Change Order</u>	<u>Total</u>
Completed to Date	96.18%	\$ <u>844,317.00</u> ✓	100.00% \$ <u>129,855.00</u> ✓	\$ <u>974,172.00</u>
Retained	REDUCED []	\$ <u>73,965.00</u>	\$ <u>11,626.00</u>	\$ <u>85,591.00</u>
Amount Subject to Payment		\$ <u>770,352.00</u>	\$ <u>118,229.00</u>	\$ <u>888,581.00</u>
Payments to Date		\$ <u>717,066.00</u>	\$ <u>113,167.00</u>	\$ <u>830,233.00</u>
Payments Now Due		\$ <u>53,286.00</u>	\$ <u>5,062.00</u>	\$ <u>58,348.00</u>

Payment No. **FINAL []** 6

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
 Contractor **IS NOT** participating in the apprenticeship program on this contract.
 Contract **IS** participating in the apprenticeship program on this contract and have submitted all apprenticeship approval forms.

1 Computed and Checked by

3 Recommended: [Signature] AUG 20 2015 Date
 Project Inspector or Engineer
 4 Recommended: [Signature] AUG 20 2015 Date
 Area Engineer/Architect
 5 Approved: [Signature] AUG 20 2015 Date
 Branch Chief or District Engineer

Allied Pacific Builders, Inc.
 Name of Contractor
[Signature]
 William Alicar, President
 08/04/15
 By signature / Title Date

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

[Signature] AUG 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.: 6

PROJECT TITLE: LEEWARD HEALTH CENTER - REPAIR SPALLING

BILLING MONTH: July-15

DAGS JOB NO.: 1 2-20-2681

CONTRACT NO.: 62169

CONTRACTOR: ALLIED PACIFIC BUILDERS, INC.

VENDOR CODE: 28267800

Original Contract Payment		Suffix: 1		
<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
01	B11-408M	\$59,290.00	\$6,004.00	\$53,286.00
Totals:		\$59,290.00	\$6,004.00	\$53,286.00

Change Order Payment		Suffix: 2, 3		
<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
03	B11-408M	\$5,624.00	\$562.00	\$5,062.00
Totals:		\$5,624.00	\$562.00	\$5,062.00

Grand Total:		\$64,914.00	\$6,566.00	\$58,348.00
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Verified By Y Xu DATE 08/26/15

(This Section for Administrative Services Office Use Only)

Vendor Code 28267800

Cost Code 3A1

Voucher No. 8298N47

Verified By ms AUG 28 2015