

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

FOR THE MONTH OF August 2011

Date: August 19, 2011

CONTRACTOR: Henry's Equipment Rental & Sales, Inc.

ADDRESS: P.O. Box 4070

Contract No. 59477

City, State ZIP: Waianae, HI 96792

DAGS Job No. 12-27-5580

PROJECT TITLE: Women's Community Correctional Center Sewer System Improvements

CONTRACT

Basic Contract Amount \$ 275,500.00

FOR INSPECTION BRANCH USE	
<input type="checkbox"/> SUBMITTAL REGISTER	<input type="checkbox"/> COMMENCEMENT REQUIREMENTS
DUE MONTHLY:	
<input type="checkbox"/> PROJECT SCHEDULE - INITIAL & ONGOING	
<input checked="" type="checkbox"/> DAILY REPORTS	<input checked="" 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 \$ 11,789.00

Adjusted Contract Amount \$ 287,289.00

WORK ACCOMPLISHED

		<u>Basic Contract</u>	<u>Change Order</u>	<u>Total</u>
Completed to Date	100.00%	\$ <u>275,500.00</u>	100.00% \$ <u>11,789.00</u>	\$ <u>287,289.00</u>
Retained	REDUCED <input type="checkbox"/>	\$ <u>-</u>	\$ <u>-</u>	\$ <u>-</u>
Amount Subject to Payment		\$ <u>275,500.00</u>	\$ <u>11,789.00</u>	\$ <u>287,289.00</u>
Payments to Date		\$ <u>261,550.00</u>	\$ <u>10,887.00</u>	\$ <u>272,437.00</u>
Payments Now Due		\$ <u>13,950.00</u>	\$ <u>902.00</u>	\$ <u>14,852.00</u>

Payment No. **FINAL** 5

Remarks:

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 at least 80% of our workforce resides in Hawaii

1. Computed and Checked by:

King Peterson SEP - 6 2011

3. Recommended: Project Inspector/Engineer Date:

[Signature] SEP - 6 2011

4. Recommended: Area Engineer/Architect Date:

Clyde K. Kessler SEP - 6 2011

5. Approved: Branch Chief or District Engineer Date:

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

[Signature] SEP - 6 2011
 State Public Works Administrator Date:

Henry's Equipment Rental & Sales, Inc.

Name of Contractor

[Signature] Kan [Name] 8/19/11

By signature / Title: _____ Date: _____

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

PAYMENT NO.: 5

PROJECT TITLE: WOMEN'S COMMUNITY CORRECTIONAL CENTER - SEWER SYSTEM IMPROVEMENTS

BILLING MONTH: August-11

DAGS JOB NO.: 1 2-27-5580

CONTRACT NO.: 59477

CONTRACTOR: HENRY'S EQUIPM'T RENTAL & SALES,INC

VENDOR CODE: 24391400

Original Contract Payment		Suffix: 1		
<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
01	B07-820M	\$0.00	(\$13,950.00)	\$13,950.00
Totals:			(\$13,950.00)	\$13,950.00

Change Order Payment		Suffix: 2		
<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
02	B07-820M	\$0.00	(\$902.00)	\$902.00
Totals:			(\$902.00)	\$902.00

Grand Total:		(\$14,852.00)	\$14,852.00
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[Handwritten Signature]

Verified By _____ **DATE** _____

(This Section for Administrative Services Office Use Only)

Vendor Code 24391400

Cost Code 3A1

Voucher No. 09043N11

Verified By [Signature] 9/12/11