

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

December  
**FOR THE MONTH OF** December 2012

Date: December 13, 2012

**CONTRACTOR :** MJ Construction, Inc.  
**ADDRESS:** 4-155 Leole Street C-5  
**City, State ZIP:** Waipahu, HI 96797  
**PROJECT TITLE:** CCC, Module 3, 4, 11, & 13, Various Repairs & Improvements

**Contract No.** 59549  
**DAGS Job No.** 12-27-5616

**CONTRACT**

Basic Contract Amount \$ 428,000.00

<b>FOR INSPECTION BRANCH USE</b>	
<input checked="" type="checkbox"/> SUBMITTAL REGISTER	<input checked="" type="checkbox"/> COMMENCEMENT REQUIREMENTS
<b>DUE MONTHLY:</b>	<input checked="" type="checkbox"/> PROJECT SCHEDULE
<input checked="" type="checkbox"/> DAILY REPORTS	<input checked="" type="checkbox"/> PAYROLL AFFIDA
<b>MONTHLY ESTIMATE CHECKLIST</b>	<input checked="" type="checkbox"/> CONTRACT NUMBER
<input checked="" type="checkbox"/> PROJECT NAME AND LOCATION	<input checked="" type="checkbox"/> ALL SIGNATURES
<b>SPECIALTY / MISC:</b>	<input checked="" type="checkbox"/> PROJECT ACCEPTANCE
<input checked="" type="checkbox"/> AIR COND & PAINT ACCPT DONE	

**CHANGE ORDER**

Total \$ 66,256.00

Adjusted Contract Amount \$ 494,256.00

<u>WORK ACCOMPLISHED</u>	<u>Basic Contract</u>	<u>Change Order</u>	<u>Total</u>
Completed to Date	100.00% \$ <u>428,000.00</u>	100.00% \$ <u>66,256.00</u>	\$ <u>494,256.00</u>
Retained <b>REDUCED [ ]</b>	\$ <u>-</u>	\$ <u>-</u>	\$ <u>-</u>
Amount Subject to Payment	\$ <u>428,000.00</u>	\$ <u>66,256.00</u>	\$ <u>494,256.00</u>
Payments to Date	\$ <u>425,860.00</u>	\$ <u>4,439.00</u>	\$ <u>430,299.00</u>
Payments Now Due	\$ <u>2,140.00</u>	\$ <u>61,817.00</u>	\$ <u>63,957.00</u>

**Payment No.** FINAL [X] 3 Final

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 least 80% of our workforce resides in Hawaii.

1. Computed and Checked by:  
*[Signature]* JAN - 3 2013  
12/20/2012

3. Recommended: Project Inspector or Engineer  
*[Signature]* DN JAN - 3 2013  
12/20/2012

4. Recommended: Area Engineer/Architect  
*[Signature]* JAN - 4 2013

5. Approved: Branch Chief/District Engineer  
*[Signature]* JAN 4 2013  
 State Public Works Administrator

MJ Construction, Inc. / Michael Son  
 Name of Contractor

*[Signature]* Project Coordinator 12-13-2012  
 By signature / Title: Date

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





