

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

FOR THE MONTH OF September, 2014

Date: September 30, 2014

CONTRACTOR: Brian's Contracting, Inc.

ADDRESS: P.O. Box 17790

City, State ZIP: Honolulu, Hawaii 96817

PROJECT TITLE: Allialmoku Hale Building Improvements
CONTRACT

Contract No. 63003

DAGS Job No. 12-29-7515

Basic Contract Amount \$ 1,357,000.00

FOR INSPECTION BRANCH USE	
<input type="checkbox"/> SUBMITTAL REGISTER	<input checked="" 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 type="checkbox"/> ALL SIGNATURES
SPECIALTY / MISC:	
<input type="checkbox"/> AIR CONDITION ACCEPTANCE	<input type="checkbox"/> PAINT ACCEPTANCE

CHANGE ORDERS

Total \$ -

Adjusted Contract Amount \$ 1,357,000.00

WORK ACCOMPLISHED

		<u>Basic Contract</u>
Completed to Date	15.39%	\$ 208,815.00
Retained	REDUCED []	\$ 16,928.00
Amount Subject to Payment		\$ 191,887.00
Payments to Date		\$ 47,225.00
Payments Now Due		\$ 144,662.00

	<u>Change Order</u>	<u>Total</u>
#DIV/0!	\$ -	\$ 208,815.00
	\$ -	\$ 16,928.00
	\$ -	\$ 191,887.00
	\$ -	\$ 47,225.00
	\$ -	\$ 144,662.00

Payment No. FINAL [] 2

Remarks: For projects already Accepted and/or Completed, delete Statement Of Contract Time and add..	FOR OFFICE USE ONLY	
	<input type="checkbox"/> Project Acceptance Date	
	<input type="checkbox"/> Project Completion 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.

1. Computed and Checked by: [Signature] Date: OCT 20 2014

3. Recommended: [Signature] Project Inspector or Engineer Date: OCT 20 2014

4. Recommended: [Signature] Area Engineer/Architect Date: OCT 20 2014

5. Approved: [Signature] Branch Chief or District Engineer Date: OCT 20 2014

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

[Signature] State Public Works Administrator Date: OCT 21 2014

BRIAN'S CONTRACTING, INC.

Name of Contractor

[Signature] Date: 9/30/2014

for Brian M. Arakaki, President

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

PAYMENT NO.: 2

PROJECT TITLE: ALIIAIMOKU HALE - BUILDING IMPROVEMENTS

BILLING MONTH: September-14

DAGS JOB NO.: 1 2-29-7515

CONTRACT NO.: 63003

CONTRACTOR: BRIAN'S CONTRACTING, INC

VENDOR CODE: 30439600

Original Contract Payment		Suffix: 1		
<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
01	B12-878M	\$158,015.00	\$13,353.00	\$144,662.00
Totals:		\$158,015.00	\$13,353.00	\$144,662.00

Change Order Payment		Suffix: 2		
<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
02	B12-878M	\$0.00	\$0.00	\$0.00
Totals:				

Grand Total: \$158,015.00 \$13,353.00 \$144,662.00

Verified By *Y Xu* DATE *10/21/14*

(This Section for Administrative Services Office Use Only)

Vendor Code 30439600

Cost Code 3A1

Voucher No. *10223 N67*

Verified By *Pr* OCT 29 2014