

# **Professional Agreement Invoice and Progress Report**

Idaho Transportation Department

# This page must be filled out monthly by the Consultant and forwarded to the Agreement Administrator with the monthly invoice. If necessary, attach additional sheets for continuation.

Key Number	Project Number		Project Name		Date		
	ITD RP274		ITD K-12 Safety Outrea	ach	1/15/2019		
Agreement Adr		Progres	ss Report Number	Agreement Number			
Cecelia Awu		EN30		UI-18-02			
Consultant's Na	ame			Report/Billing Period (Fr	Billing Period (From and To)		
				12/1/18-12/31/18			
Prompt Payme	nt To Subconsultant(s) Verified	/	Authorization Number	Invoice Number			
🗌 Yes 🗌 I	No			No Invoice			
Describe Worl	k Accomplished During the Month (List I	Major Activities t	hat were in progress during this	s period and estimate the remaining	g time for each.)		
Summarize W n/a	een initiated for project tasks 1 (do	npleted and Da	tes) (List Major Activities that v	were completed, including completi			
Printed Name		Title		Consultant's Signature			
Kevin Chan	g	Principal Inv	vestigator				
L		1					

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Idaho Transportation Department

#### Status Report This page must be completed by the Agreement Administrator

A completed status report must accompany all Agreement invoices recommended for payment. The requested percentage of progress measurements for this report/billing period are required.

Key Number	Program Number						Progress Report Number Ag			Agreement Number		
	ITD R	P274			2	4 U			JI-18-02			
Agreement Time Time Passed						Percent of Agreement Time Elapsed			ed Pe	Percent of Work Completed		
18 months			4			22.23%				8%		
Original Agreement A	Amount	Suppleme	ental(s)	Current Agreement Amo			nt Payments (Including this Paym			ent) Percent of Agreement Dollars Paid		
\$145,000.00		\$0.00		\$145,000.00			\$0.00			00.00%		
Prompt Payment To	Subcons	sultant(s) V	'erified			This In	Invoice To Dat		Date		Negotiated	
Yes No No Fixe				Fixed Fee \$		\$				\$		
If There is a Signific	ant Vari	iance Betv	veen the Percenta	ges, F	Please Explain							
Consultant Invoice N	umber				Th	This Payment Amount						
No Invoice						\$0.00						
Report Reviewed By									Rev	iew Date		

### Consultant Performance To Be Completed Monthly by the Agreement Administrator

Work planned for this period was completed	Quality of work was completed satisfactory	Discussed performance with Consultant
🗌 Yes 🗌 No	🗌 Yes 🗌 No	🗌 Yes 🗌 No
Explain		
Performance: Describe the Consultants performa	nce during this period	

Progress Payment: I certify that the Agreement provisions have been reviewed, the invoice amount checked, progress is substantiated, significant material expenses have support documentation (receipts), and the costs billed are project related and represent the work accomplished. I hereby approve the progress estimate for payment.

**Final Payment:** I certify that all work under the terms of the Agreement has been satisfactorily completed, any capital assets acquired have been delivered or value received, an affidavit of indebtedness received, and the project reviewed or audited and costs verified for work performed. I hereby approve final payment under the Agreement.

Agreement Administrator's Signature	Date	Second (Independent) Reviewer's Signature

ТАЅК	9/18	10/18	11/18	12/18	1/19	2/19
1: Document Existing Resources			25%	60%		
2: Establish Project Stakeholders List				20%		
3: Formulate Stakeholder Needs						
4: Develop Interactive Pilot Activities						
5: Evaluate Effectiveness of Interactive Pilot Activities						
6: Modify Interactive Pilot Activities						
7: Determine Future Education and Outreach Project Capacity						
8: Progress Check with Project Stakeholders						
9: Formalize Interactive Activities						
10: Define Competition Rules, Deadlines, and Evaluation procedures						
11: Broadcast and Promote Public Education Competition						
12: Evaluate Competition Submission						
13: Project Final Report						

## ITD RP274;EN3029; UI-18-02

3/19	4/19	5/19	6/19	7/19	8/19	9/19	10/19	11/19	12/19	1/20	2/20	3/20