



Professional Agreement Invoice and Progress Report

ITD 0771 (Rev. 01-17)

Idaho Transportation Department

itd.idaho.gov

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 ITD RP274	Project Name ITD K-12 Safety Outreach	Date 10/20/2018
Agreement Administrator Cecilia Awusie	Progress Report Number EN3029-2	Agreement Number UI-18-02	
Consultant's Name		Report/Billing Period (From and To) 10/1/18-10/31/18	
Prompt Payment To Subconsultant(s) Verified <input type="checkbox"/> Yes <input type="checkbox"/> No	Authorization Number	Invoice Number No Invoice	
Describe Work Accomplished During the Month (List Major Activities that were in progress during this period and estimate the remaining time for each.) The principal investigators held an initial planning meeting with the project manager on Thursday, October 25th. The project kick-off meeting, to include members of the technical advisory committee, is scheduled for Tuesday, November 27th. This meeting was postponed from an earlier date due to an Office of Highway Safety scheduling conflict.			
Summarize Work Completed to Date (Milestones Completed and Dates) (List Major Activities that were completed, including completion dates.) n/a			
List Information Required from ITD to Avoid Delays			
List Changes in Scope or Complexity that Requires a Supplemental Agreement or Time Adjustments			
Printed Name Kevin Chang	Title Principal Investigator	Consultant's Signature	

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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 ITD RP274	Progress Report Number 2	Agreement Number UI-18-02
Agreement Time 18 months	Time Passed 2	Percent of Agreement Time Elapsed 11.12%	Percent of Work Completed 2%
Original Agreement Amount \$145,000.00	Supplemental(s) \$0.00	Current Agreement Amount \$145,000.00	Payments (Including this Payment) \$0.00
Percent of Agreement Dollars Paid 00.00%			
Prompt Payment To Subconsultant(s) Verified <input type="checkbox"/> Yes <input type="checkbox"/> No	Fixed Fee	This Invoice \$	To Date \$
		Negotiated \$	
If There is a Significant Variance Between the Percentages, Please Explain			
Consultant Invoice Number No Invoice		This Payment Amount \$0.00	
Report Reviewed By			Review Date

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

Work planned for this period was completed <input type="checkbox"/> Yes <input type="checkbox"/> No	Quality of work was completed satisfactory <input type="checkbox"/> Yes <input type="checkbox"/> No	Discussed performance with Consultant <input type="checkbox"/> Yes <input type="checkbox"/> No
Explain		
Performance: Describe the Consultants performance 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
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