



# 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 RP 235	Project Name ITD AASHTOWare Pavement ME Design	Date 2/6/2018
Agreement Administrator Mike Santi	Progress Report Number KLK572-33	Agreement Number UI-15-04	
Consultant's Name		Report/Billing Period (From and To) 1/1/18-1/31/18	
Prompt Payment To Subconsultant(s) Verified <input type="checkbox"/> Yes <input type="checkbox"/> No	Authorization Number	Invoice Number Invoice 29	
Describe Work Accomplished During the Month (List Major Activities that were in progress during this period and estimate the remaining time for each.) Work during the Month of January 2018 included: <ul style="list-style-type: none"> <li>- Continue review of the developed calibration factors for all models.</li> <li>- Run tests of several design cases.</li> <li>- Working on the draft of the final report.</li> <li>- Working on the development of the training workshop</li> <li>- Prepare and submit Final Report Outline for ITD review</li> </ul>			
Summarize Work Completed to Date (Milestones Completed and Dates) (List Major Activities that were completed, including completion dates.) Please refer to the attached Gantt Chart. Most of the project research work is close to complete. The team now focuses on preparation of the final report. Work progress so far is estimated by about 93% complete.			
List Information Required from ITD to Avoid Delays			
List Changes in Scope or Complexity that Requires a Supplemental Agreement or Time Adjustments			
Printed Name Fouad Bayomy	Title Principal Investigator	Consultant's Signature	

# Professional Agreement Invoice and Progress Report

ITD 0771 (Rev. 01-17)

Idaho Transportation Department

itd.idaho.gov

## 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	Agreement Number
		33	UI-15-04
Agreement Time	Time Passed	Percent of Agreement Time Elapsed	Percent of Work Completed
36 months	33	91.67%	93%
Original Agreement Amount	Supplemental(s)	Current Agreement Amount	Payments (Including this Payment)
\$338,036.53	\$0.00	\$338,036.53	\$284,038.76
Percent of Agreement Dollars Paid			
84.03%			
Prompt Payment To Subconsultant(s) Verified	<b>Fixed Fee</b>	This Invoice	To Date
<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	\$
Negotiated			
\$			
If There is a Significant Variance Between the Percentages, Please Explain			
Consultant Invoice Number	This Payment Amount		
Invoice 29	\$12,161.72		
Report Reviewed By			Review 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
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<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

Distribution: DRI (Original) - Project File

Copy - Prime Consultant

