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 RP 254			ITD Safety analys	sis of School Zones	4/17/2017						
Agreement Admin	nistrator		Progress Re	eport Number	Agreement Number							
John Tomlinso	n		KLK575-1	0	UI-16-04							
Consultant					Report/Billing Period (From and To)							
					3/1/17-3/31/17	7						
Certification of Pag	yment Submitted	Certification Date	PSA	Number	Invoice Number							
🗌 Yes 🗌] No				Invoice #8							
Description of Wo	ork Accomplished D	Juring the Month	I		I							
steps.		he Technical Advisor		∍ on March 30th to	provide a project update	and to discuss next						
Summary of Work Please see Ga		e (Milestones Completed a	and Dates)									
Information Requi	ired from ITD to Ave	oid Delays										
List Changes in S	cope or Complexity	y Requiring a Supplementa	al Agreement c	or Time Adjustments								
	C C	-	-									
Consultant's Signa	ature			Printed Name and	Titla							
Consultant 3 Olyna												
				Kevin Chang, P	Kevin Chang, Principal Investigator							

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Idaho Transportation Department

This page must be filled out by the Agreement Administrator.

Key Number	Program (Work Authority)	Agreement	Number					
		10	10UI-16-0	-04				
Report Reviewed B	у У			Review Date				
The Following was	Initiated			-				

Status Report

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

Agreement Time		Time Passed			Percent	of Agreement Time	Elapsed F	Percent of Work Completed			
18 months		10 months				55.56%		58.3%			
Original Agreement Amount Suppleme		ental(s)	Current Agreement A		mount	Payments (Includin	g this Paymen	t) Percent c	of Agreement Dollars Paid		
\$54,695.00	\$54,695.00 \$0.00		\$54	\$54,695.00		\$24,160.80			44.18%		
Certification of Payment Submitted C		ertification Date				nvoice	To Date	•	Negotiated		
🗌 Yes 🛛 🗌 No				Fixed Fee	* \$		\$		\$		
If There is a Significant Varia	, Plea	ise Explain									
Consultant Invoice Number				This	s Payme	nt Amount					
Invoice #8			\$1,	,566.72							

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						

TASK	5/16	6/16	7/16	8/16	9/16	10/16	11/16	12/16	1/17	2/17	3/17	4/17	5/17	6/17	7/17	8/17	9/17	10/17
1: Literature Review			10%	50%	75%	95%	100%											
2: ID Subject Locations			25%	75%	95%	100%												
3: Analyze Crash Data					5%	20%	60%	80%	80%	90%	100%							
4: Develop Survey						5%	35%	75%	95%	95%	100%							
5: Administer Survey								5%	20%	50%	100%							
6: Analyze Results											25%							
7: Conduct Site Visits																		
8: Develop Outreach Materials																		
9: Final Report																		
DELIVERABLES	5/16	6/16	7/16	8/16	9/16	10/16	11/16	12/16	1/17	2/17	3/17	4/17	5/17	6/17	7/17	8/17	9/17	10/17
1: Quarterly Report																		
2: Final Report																		