ITD 0771 (Rev. 10-06) itd.idaho.gov

## **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 Safety analysis of School	ool Zones	12/12/2016		
Agreement Administrator Progress R				port Number	Agreement Number			
John Tomlinson	1		KLK575-6		UI-16-04			
Consultant					Report/Billing Period (F	rom and To)		
					11/1/16-11/30/16			
Certification of Payr	ment Submitted	Certification Date	PSA	Number	Invoice Number			
☐ Yes ☐	No				Invoice #4			
Description of Work	Accomplished D	uring the Month	· · · · · · · · · · · · · · · · · · ·		<b>!</b>			
An initial draft o	f the literature	review was sent to the	e task for r	eview.				
Crash data ana	lysis work is u	nderway.						
Questions for th	ne school surv	ey are being identified						
Questions for ti	ic scribbi surv	cy are being identified	•					
Summary of Work (	Completed to Date	e (Milestones Completed an	d Dates)					
	20p.0.00 to 20.	c (missiones compision an						
Information Require	ed from ITD to Avo	nid Delavs						
miormation require	a nom 112 to 7tv	old Boldys						
List Observes is Oss	0	Danisia a Ossanla sa sa tal	A 1	T'es a A d'essates auto				
List Changes in Sco	ope or Complexity	Requiring a Supplemental	Agreement o	r Time Adjustments				
Consultant's Signat	ure			Printed Name and Title				
				Kevin Chang, Principal In	vestigator			

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Idaho Transportation Department

## This page must be filled out by the Agreement Administrator.

Key Number   Program (Work Authority)   Progress Report Number						Agreement Number					
rtoy rtambol	r rogram (rro	it / tailonty)				UI-16-04					
Daniel Davis and Dav											
Report Reviewed By								Re	eview Date		
The Following was Initia	ated										
1											
1											
				-							
Status Report											
A completed status	report mus	t accompany	all Agree	ement invoices	reco	mmen	nded for pa	yment. The	requeste	ed percentage	
measurements of p							·		•		
Agreement Time		Time Passed	d	Percent of Agreement Tim			ement Time	e Elapsed Percent of Work Completed			
18 months		7 months			38.89%				0%		
Original Agreement Am	ount Supple	mental(s)	Curr	ent Agreement Am				g this Payment)			
\$54,695.00	\$0.00			4,695.00 \$10,905.36			,	19.94%			
Certification of Paymen	'										
•		Certification Dat	ertification Date Fixed			This Invoice		To Date		Negotiated	
☐ Yes ☐ No				Φ			\$		\$		
If There is a Significant	Variance Bet	ween the Percen	ntages, Plea	se Explain							
r											
Consultant Invoice Num	This	This Payment Amount									
Invoice #4					\$1,566.72						
Progress Pa	vment:	certify that th	he Aaree	ment provision	ns ha	ıve be	en review	ed. the invo	ice amo	unt checked.	
										d the costs billed a	
project related	and repre	sent the wor	rk accom	plished. I her	eby a	approv	ve the pro	gress estim	ate for p	ayment.	
_											
										oleted, any capital	
										he project reviewe	
or audited and		THE TAX TO A									
	a cosis vei	illed for worr	к репопп	ea. I nereby	appro	ove fir	nai payme	nt under the	Agreen	nent.	
Agreement Administrate			к репопп	Date	<u></u>	ove fir	. ,	nt under the dependent) Revi			

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

2/17	3/17	4/17	5/17	6/17	7/17	8/17	9/17	10/17
2/17	3/17	4/17	5/17	6/17	7/17	8/17	9/17	10/17