



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 261	Project Name ITD - Augment Asphalt Mix	Date 3/6/2018
Agreement Administrator Mike Santi		Progress Report Number KLK581-14	Agreement Number UI-17-01
Consultant's Name			Report/Billing Period (From and To) 2/1/18-2/28/18
Prompt Payment To Subconsultant(s) Verified <input type="checkbox"/> Yes <input type="checkbox"/> No		Authorization Number	Invoice Number Inv #14
Describe Work Accomplished During the Month (List Major Activities that were in progress during this period and estimate the remaining time for each.) - We completed the Hamburg testing on field cores and plant-mixed, lab-compacted test specimens. This test is used to evaluate the rutting resistance and moisture susceptibility of asphalt mixtures. - We are working on the cracking tests (e.g., SCB-Jc, SCB- IFIT, and IDT). - We have started in the APA rutting testing. - We have analyzed the test results for all the samples tested to date and currently we are preparing a tech memo on the results.			
Summarize Work Completed to Date (Milestones Completed and Dates) (List Major Activities that were completed, including completion dates.) The research team completed Task 1 (literature review), and Task 2 (Identify and select pavement sites for evaluation).			
List Information Required from ITD to Avoid Delays The research team is still looking to receive cores from pavement sites and loose mixtures from new paving projects, in addition to the video logs to analyze cracking performance.			
List Changes in Scope or Complexity that Requires a Supplemental Agreement or Time Adjustments			
Printed Name Emad Kassem	Title Principal Investigator	Consultant's Signature <i>Emad Kassem</i>	

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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		Progress Report Number 14	Agreement Number UI-17-01	
Agreement Time 26 months		Time Passed 15		Percent of Agreement Time Elapsed 57.69%		Percent of Work Completed 51%
Original Agreement Amount \$169,998.97	Supplemental(s) \$0.00	Current Agreement Amount \$169,998.97	Payments (Including this Payment) \$90,797.31		Percent of Agreement Dollars Paid 53.41%	
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 Invoice #14				This Payment Amount \$4,821.20		
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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	Yr 2016												Yr 2017												Yr 2018												Yr 2019							
	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Jan					
Task 1	5%		20%	50%	75%	100%																																						
Task 2													20%	40%	50%	60%	90%	90%	95%	100%																								
Task 3													10%	20%	25%	30%	40%	40%	50%	55%	65%	75%	80%	80%	80%	80%																		
Task 4													3%	5%	10%	13%	17%	25%	28%	33%	40%	50%																						
Task 5																									3%	5%	10%																	
Task 6																																												
Task 7																																												
Deliverable No.												1	2	3	4	5	6	7	8																									