



FACILITIES MANAGEMENT
Design & Construction

CONTRACTOR PAY APPLICATION REQUEST

Application/Invoice Date: 06/14/2018
Application No.: 005-R003
Invoice No.: 0744901-005
Contract #: CT8279
Payment terms: Net Zero

To:

University of Iowa
Planning, Design & Construction
200 USB
Iowa City, IA 52242

From Contractor:

Woodruff Construction LLC
1890 Kountry Lane,
Fort Dodge, IA 50501

Project Title and Number:

Medical Research Facility - Emergency Pipe Repair and Remediation
Project # 0744901

PAY APPLICATION PERIOD FROM: 05/05/2018 TO: 05/25/2018

1. ORIGINAL CONTRACT SUM:			\$379,000.00
Change Order Summary	<u>ADDITIONS</u>	<u>DEDUCTIONS</u>	
Total changes approved in previous months by owner	\$0.00	\$0.00	
Total approved this month	\$0.00	\$0.00	
TOTALS	\$0.00	\$0.00	
2. NET CHANGE BY CHANGE ORDERS:			\$0.00
3. CONTRACT SUM TO DATE: (Line 1 + 2)			\$379,000.00
4. TOTAL COMPLETED & SORTED TO DATE:			\$356,034.10 (94%)
5. RETAINAGE: (Completed Work & Stored Material)			\$0.00
6. TOTAL EARNED LESS RETAINAGE: (Line 4 less Line 5 Total)			\$356,034.10
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT: (Line 6 from prior Certificate)			\$298,141.91
8. CURRENT PAYMENT DUE:			\$57,892.19 ✓
9. BALANCE TO FINISH, INCLUDING RETAINAGE: (Line 3 less Line 6)			\$22,965.90



WOODRUFF CONSTRUCTION, LLC



1890 Kountry Lane
Fort Dodge, Iowa 50501

Phone (515) 576-1118

Fax (515) 955-2170

501 Greenfield Drive

Tiffin, Iowa 52340

Phone (319) 545-2410

Fax (319) 545-2411

5/29/2018

Danial Cassidy
UI-FM – D&C.

RE: MRF Water Damage – Pay Application Summary

SUBJ: **Pay App - 005**

Dan,

For all the work from period 5/7/2018 to 5/25/2018 The total amount is \$57,892.19. Labor and material cost documents are enclosed for review.

If you require additional clarification, please contact me. Thank you for your prompt response.

Sincerely,
WOODRUFF CONSTRUCTION, LLC

Leon Zhang
Assistant Project Manager

COST ANALYSIS**MRF Water Damage T&M**

Period: 5/7/2018 to 5/25/2018
Pay App - 05

TOTAL WOODRUFF LABOR COST	= \$	6,135.20
TOTAL WOODRUFF MATERIAL COST	= \$	-
SUBTOTAL	= \$	6,135.20
plus OH&P @	15% = \$	920
	= \$	7,055.48

TOTAL SUBCONTRACT COST	= \$	48,415.91
plus OH&P @	5% = \$	2,420.80
	= \$	50,836.71

TOTAL PRICE FOR THE PERIOD \$ 57,892.19

COST ANALYSIS**MRF Water Damage T&M**

Pay App - 05 Period: 7-May-18 to 25-May-18

	LABOR CLASSIFICATION/ MATERIAL	QUANTITY	UNIT	UNIT LABOR	UNIT MAT'L	UNIT SUBCON	LABOR	MATERIAL	SUBCON	TOTAL
	WOODRUFF WORK									
	LABOR									
5/7-5/11	Mart Toth - Superintendent	40	hr	\$ 76.69			\$ 3,067.60			\$ 3,067.60
5/14-5/18	Mart Toth - Superintendent	40	hr	\$ 76.69			\$ 3,067.60			\$ 3,067.60
	SUBCONTRACTORS						\$ -	\$ -	\$ -	\$ -
	Schumacher Elevator						\$ -	\$ -	\$ 41,918.49	\$ 41,918.49

	Bachmeier Carpet One						\$ -	\$ -	\$ 727.31	\$ 727.31	
	Corridor Paint						\$ -	\$ -	\$ 5,633.22	\$ 5,633.22	
	AAA						\$ -	\$ -	\$ 76.89	\$ 76.89	
	Advanced Electric						\$ -	\$ -	\$ 60.00	\$ 60.00	
							\$ -	\$ -	\$ -	\$ -	
SUBTOTAL								\$ 6,135.20	\$ -	\$ 48,415.91	\$ 54,551.11
PERIOD TOTAL								\$ 6,135.20	\$ -	\$ 48,415.91	\$ 54,551.11

WCC Labor Cost





TIME AND MATERIAL FORM

General Contractor WOODLUFF CONST. CO. Date Work Performed 5/14-5/18

Subcontractor _____ Change Order Request No _____

Project Name MLF WATER DAMAGE REPAIR Project Number #0744901

Description of Work SUPERVISION

Equipment and Material (attach invoices)

Subcontractor's Representative (if applicable) _____

General Contractor's Representative

Owner's Representative (Required) James J. [Signature]

White=Contractor Copy
Yellow=Owner Copy
April, 2007

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

PAYMENT APPLICATION

Page 1

TO: Medical Research Facility 55 Grand Ave S Iowa City, IA 52242 Attn:	PROJECT 39070 NAME AND LOCATION: Medical Research Facility 55 Grand Ave S Iowa City, IA 52242	APPLICATION # 3 PERIOD THRU: 06/06/2018 PROJECT #s: 39070 DATE OF CONTRACT: 02/15/2018	Distribution to: <input type="checkbox"/> OWNER <input type="checkbox"/> ARCHITECT <input type="checkbox"/> CONTRACTOR <input type="checkbox"/>
FROM: Schumacher Elevator Company One Schumacher Way PO Box 393 Denver, IA 50622	ARCHITECT:		
FOR:			

CONTRACTOR'S SUMMARY OF WORK

Application is made for payment as shown below.
Continuation Page is attached.

1. CONTRACT AMOUNT	\$187,787.60
2. SUM OF ALL CHANGE ORDERS	\$0.00
3. CURRENT CONTRACT AMOUNT (Line 1 +/- 2)	\$187,787.60
4. TOTAL COMPLETED AND STORED (Column G on Continuation Page)	\$187,787.60
5. RETAINAGE:	
a. 5.00% of Completed Work (Columns D + E on Continuation Page)	\$9,389.00
b. 5.00% of Material Stored (Column F on Continuation Page)	\$0.00
Total Retainage (Line 5a + 5b or Column I on Continuation Page)	\$9,389.00
6. TOTAL COMPLETED AND STORED LESS RETAINAGE (Line 4 minus Line 5 Total)	\$178,398.60
7. LESS PREVIOUS PAYMENT APPLICATIONS	\$145,869.11
8. PAYMENT DUE	\$32,529.49
9. BALANCE TO COMPLETION (Line 3 minus Line 6)	\$9,389.00

SUMMARY OF CHANGE ORDERS	ADDITIONS	DEDUCTIONS
Total changes approved in previous months	\$0.00	\$0.00
Total approved this month	\$0.00	\$0.00
TOTALS	\$0.00	\$0.00
NET CHANGES	\$0.00	

Contractor's signature below is his assurance to Owner, concerning the payment herein applied for, that: (1) the Work has been performed as required in the Contract Documents, (2) all sums previously paid to Contractor under the Contract have been used to pay Contractor's costs for labor, materials and other obligations under the Contract for Work previously paid for, and (3) Contractor is legally entitled to this payment.

CONTRACTOR: Schumacher Elevator Company

By: *Greg Gotsch*Date: 6/6/2018

State of: Iowa

County of: Bremer

Subscribed and sworn to before

me this 6th day of June 2018

Notary Public:

My Commission Expires: March 9, 2020

MELODIE DESPARD

Notarial Seal - Iowa

Commission # 733350

My Commission Expires March 9, 2020

ARCHITECT'S CERTIFICATION

Architect's signature below is his assurance to Owner, concerning the payment herein applied for, that: (1) Architect has inspected the Work represented by this Application, (2) such Work has been completed to the extent indicated in this Application, and the quality of workmanship and materials conforms with the Contract Documents, (3) this Application for Payment accurately states the amount of Work completed and payment due therefor, and (4) Architect knows of no reason why payment should not be made. **95% of material + labor for this pay app period**

CERTIFIED AMOUNT: _____

(If the certified amount is different from the payment due, you should attach an explanation. Initial all the figures that are changed to match the certified amount.)

ARCHITECT:

By: _____

Date: _____

Neither this Application nor payment applied for herein is assignable or negotiable. Payment shall be made only to Contractor, and is without prejudice to any rights of Owner or Contractor under the Contract Documents or otherwise.

PAYMENT APPLICATION

Schumacher Elevator Company

APPLICATION FOR PAYMENT - CONTINUATION SHEET

Page 2 of 2

PROJECT: 39070
Medical Research Facility

APPLICATION #:	3
DATE OF APPLICATION:	06/06/2018
PERIOD THRU:	06/06/2018
PROJECT #s:	39070

Schumacher Elevator Company One Schumacher Way Denver, IA 50622

A	B	C	D	E	F	G		H	I
ITEM #	WORK DESCRIPTION	SCHEDULED AMOUNT	COMPLETED WORK		STORED MATERIALS (NOT IN D OR E)	TOTAL COMPLETED AND STORED (D + E + F)	% COMP. (G / C)	BALANCE TO COMPLETION (C-G)	RETAINAGE (If Variable)
			AMOUNT PREVIOUS PERIODS	AMOUNT THIS PERIOD					
0010	Work Completed through February 2018	\$28,181.79	\$28,181.79	\$0.00	\$0.00	\$28,181.79	100%	\$0.00	\$1,409.00
0020	Work Completed through March 2018	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00
0030	Labor Completed through April 2018	\$57,756.83	\$57,756.83	\$0.00	\$0.00	\$57,756.83	100%	\$0.00	\$2,888.00
0040	Materials Completed through April 2018	\$67,607.49	\$67,607.49	\$0.00	\$0.00	\$67,607.49	100%	\$0.00	\$3,380.00
0050	Labor Completed through May 2018	\$33,741.49	\$0.00	\$33,741.49	\$0.00	\$33,741.49	100%	\$0.00	\$1,687.00
0060	Materials Completed through May 2018	\$500.00	\$0.00	\$500.00	\$0.00	\$500.00	100%	\$0.00	\$25.00
TOTALS		\$187,787.60	\$153,546.11	\$34,241.49	\$0.00	\$187,787.60	100%	\$0.00	\$9,389.00

PAYMENT APPLICATION

TO: Medical Research Facility 55 Grand Ave S Iowa City, IA 52242 Attn:	PROJECT 39070 NAME AND LOCATION: Medical Research Facility 55 Grand Ave S Iowa City, IA 52242	APPLICATION # Retainage PERIOD THRU: 06/06/2018 PROJECT #s: 39070 DATE OF CONTRACT: 02/15/2018	Distribution to: <input type="checkbox"/> OWNER <input type="checkbox"/> ARCHITECT <input type="checkbox"/> CONTRACTOR <input type="checkbox"/> <input type="checkbox"/>
FROM: Schumacher Elevator Company One Schumacher Way PO Box 393 Denver, IA 50622	ARCHITECT:		
FOR:			

CONTRACTOR'S SUMMARY OF WORK

Application is made for payment as shown below.
Continuation Page is attached.

1. CONTRACT AMOUNT	\$187,787.60
2. SUM OF ALL CHANGE ORDERS	\$0.00
3. CURRENT CONTRACT AMOUNT (Line 1 +/- 2)	\$187,787.60
4. TOTAL COMPLETED AND STORED (Column G on Continuation Page)	\$187,787.60
5. RETAINAGE:	
a. 0.00% of Completed Work (Columns D + E on Continuation Page)	\$0.00
b. 0.00% of Material Stored (Column F on Continuation Page)	\$0.00
Total Retainage (Line 5a + 5b or Column I on Continuation Page)	\$0.00
6. TOTAL COMPLETED AND STORED LESS RETAINAGE (Line 4 minus Line 5 Total)	\$187,787.60
7. LESS PREVIOUS PAYMENT APPLICATIONS	\$178,398.60
8. PAYMENT DUE	\$9,389.00
9. BALANCE TO COMPLETION (Line 3 minus Line 6)	\$0.00

SUMMARY OF CHANGE ORDERS	ADDITIONS	DEDUCTIONS
Total changes approved in previous months	\$0.00	\$0.00
Total approved this month	\$0.00	\$0.00
TOTALS	\$0.00	\$0.00
NET CHANGES	\$0.00	

Contractor's signature below is his assurance to Owner, concerning the payment herein applied for, that: (1) the Work has been performed as required in the Contract Documents, (2) all sums previously paid to Contractor under the Contract have been used to pay Contractor's costs for labor, materials and other obligations under the Contract for Work previously paid for, and (3) Contractor is legally entitled to this payment.

CONTRACTOR: Schumacher Elevator Company

By: *[Signature]*Date: 6/6/2018

State of: Iowa

County of: Bremer

Subscribed and sworn to before

me this 6th day of June 2018

Notary Public: *Melodie Despard*

My Commission Expires: March 9, 2020

MELODIE DESPARD
Notarial Seal - Iowa
Commission # 733350
My Commission Expires March 9, 2020

ARCHITECT'S CERTIFICATION

Architect's signature below is his assurance to Owner, concerning the payment herein applied for, that: (1) Architect has inspected the Work represented by this Application, (2) such Work has been completed to the extent indicated in this Application, and the quality of workmanship and materials conforms with the Contract Documents, (3) this Application for Payment accurately states the amount of Work completed and payment due therefor, and (4) Architect knows of no reason why payment should not be made.

CERTIFIED AMOUNT.....

(If the certified amount is different from the payment due, you should attach an explanation. Initial all the figures that are changed to match the certified amount.)

ARCHITECT:

By: _____

Date: _____

Neither this Application nor payment applied for herein is assignable or negotiable. Payment shall be made only to Contractor, and is without prejudice to any rights of Owner or Contractor under the Contract Documents or otherwise.

PROJECT: 39070
Medical Research Facility

APPLICATION #:	Retainage
DATE OF APPLICATION:	06/06/2018
PERIOD THRU:	06/06/2018
PROJECT #s:	39070

Schumacher Elevator Company One Schumacher Way Denver, IA 50622

[illegible]

Schumacher Labor Cost

Labor	Mechanic Regular	1.7 Helper Regular	Mileage	Parking	Peridium	Hotels
5/7/2018	8		57		43.44	Mark Dahlstrom
5/7/2018		8	112		43.44	Cody Richeal
5/8/2018	8		57		43.44	Mark Dahlstrom
5/8/2018		8	112		43.44	Cody Richeal
5/9/2018	8		57		43.44	Mark Dahlstrom
5/9/2018		8	112		43.44	Cody Richeal
5/10/2018	8		83		43.44	Scott Even
5/10/2018		8	113		43.44	Levi Haskin
5/11/2018	8		57		43.44	Mark Dahlstrom
5/11/2018		8	112		43.44	Cody Richeal
5/11/2018	8		83		43.44	Scott Even
5/11/2018		8	113		43.44	Levi Haskin
5/14/2014	8		57		43.44	Mark Dahlstrom
5/14/2018		8	113		43.44	Levi Haskin
5/15/2018	8		57		43.44	Mark Dahlstrom
5/15/2018		8	113		43.44	Levi Haskin
5/16/2018	8		57		43.44	Mark Dahlstrom
5/16/2018	4					Ryan Hagarty
5/17/2018	8		95		43.44	Jason Anderson
5/17/2018		8	95		43.44	Jeremy Engle
5/18/2018	8		95		43.44	Jason Anderson
5/18/2018		8	95		43.44	Jeremy Engle

92
196.31
\$ 18,060.52

80 1845
172.04 0.545
\$ 13,763.20 \$ 1,005.53

Changed per request

\$ 912.24

\$ 33,741.49

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

Description of Work Finish car doors, install car top equipment.

Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.
DAHLSTROM	ELEV.		8	0
RICHEAL	ELEV.		8	0

Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.

Equipment and Material (attach invoices)

[illegible]

Owner's Representative (Required) David Casper

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 5-7-18 Notification #: _____
 Repair Job #: 39070 Elevator ID#: _____
 Customer: Medical Research Facility
 Location: Iowa City, IA



- Cedar Rapids 319-362-1017
- Davenport 800-779-5438
- Denver 319-984-5676
- Des Moines 515-243-5487
- Dubuque 563-588-4863
- Fort Dodge 515-576-7266
- Iowa City 800-779-5438
- Marshalltown 800-779-5438
- Mason City 641-424-1307
- Ottumwa 800-779-5438
- Sioux City 712-258-3535
- Waterloo 319-984-5676
- Quincy, IL 800-779-5438
- Rockford, IL 815-963-8340
- Minneapolis, MN 612-333-3066
- Rochester, MN 507-285-0251
- Kirkville, MO 800-779-5438
- Sioux Falls, SD 800-779-5438
- LaCrosse, WI 608-788-8410
- Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

WORK DONE:

- Install car top equipment
- Finish car doors.

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☒ NO

WORK DONE BY: Mark Dahlstrom, Cody Richea

CUSTOMER:

TIME AND MATERIAL FORM

Description of Work CAR Wing

Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.
DAHLSTROM	ELEV.		8	0
RICHEAL	ELEV.		8	0

[illegible]

Owner's Representative (Required) David [Signature]

WJ1818J-18

Date: 5-8-18 Notification #: \$ Gold Ticket \$Repair Job #: 39070 Elevator ID#:Customer: Medical Research FacilityLocation: Iowa City, IA800-779-5438
Established in 1936One Schumacher Way
P.O. Box 393 - Denver, IA 50622

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

Cedar Rapids 319-362-1017
 Davenport 800-779-5438
 Denver 319-984-5676
 Des Moines 515-243-5487
 Dubuque 563-588-4863
 Fort Dodge 515-576-7266
 Iowa City 800-779-5438
 Marshalltown 800-779-5438
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 Ottumwa 800-779-5438
 Sioux City 712-258-3535
 Waterloo 319-984-5676
 Quincy, IL 800-779-5438
 Rockford, IL 815-963-8340
 Minneapolis, MN 612-333-3066
 Rochester, MN 507-285-0251
 Kirksville, MO 800-779-5438
 Sioux Falls, SD 800-779-5438
 LaCrosse, WI 608-788-8410
 Madison, WI 608-222-3766

WORK DONE:

- car wiring

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☒ NOWORK DONE BY: Mark Dahlstrom, Cody RichesCUSTOMER: [Signature]



Facilities Management
Design & Construction

TIME AND MATERIAL FORM USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOOD RUFF CONST. CO.

Date Work Performed 5/9/18

Subcontractor SCHUMACHER ELEVATOR

Change Order Request No. _____

Project Name MLF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Car Wiring

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
DAHLSTROM	ELEV.		8	0					
RICHARD	ELEV.		8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) Scott Evers

General Contractor's Representative [Signature]

Owner's Representative (Required) [Signature]

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3 18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 5-9-18

Notification #

Gold Ticket

800-779-5438

Established in 1936

Repair Job #: 39070

Elevator ID#:

Customer: Medical Research FacilityLocation: Iowa City, IA

Elevator Company

One Schumacher Way
P.O. Box 393 - Denver, IA 50622

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	<u>8</u>			
Travel Time				
Total Time	<u>8</u>			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

Cedar Rapids 319-362-1017
 Davenport 800-779-5438
 Denver 319-984-5676
 Des Moines 515-243-5487
 Dubuque 563-588-4863
 Fort Dodge 515-576-7266
 Iowa City 800-779-5438
 Marshalltown 800-779-5438
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 Ottumwa 800-779-5438
 Sioux City 712-258-3535
 Waterloo 319-984-5676
 Quincy, IL 800-779-5438
 Rockford, IL 815-963-8340
 Minneapolis, MN 612-333-3066
 Rochester, MN 507-285-0251
 Kirksville, MO 800-779-5438
 Sioux Falls, SD 800-779-5438
 LaCrosse, WI 608-788-8410
 Madison, WI 608-222-3766

WORK DONE:

- car wiring

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☒ NO

WORK DONE BY:

Mads Dahlstrom, Gody Richenl

CUSTOMER:

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

Date Work Performed 5/10/18

Change Order Request No

Project Number 0744901

Description of Work Mount + install P.I.'S + Buttons at all floors

Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.
Scott Evers			8	
Levi Hankin			8	

Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.

Equipment and Material (attach invoices)

[illegible]

Owner's Representative (Required)

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 5-10-18 Notification #: *GOLD TICKET*
 Repair Job #: 39070 Elevator ID#: _____
 Customer: U of IA MRF
 Location: Iowa City, IA

800-779-5438
 Established in 1936



Elevator Company

One Schumacher Way
 P.O. Box 393 - Denver, IA 50622

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

Cedar Rapids 319-362-1017
 Davenport 800-779-5438
 Denver 319-984-5676
 Des Moines 515-243-5487
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 Fort Dodge 515-576-7266
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 Ottumwa 800-779-5438
 Sioux City 712-258-3535
 Waterloo 319-984-5676
 Quincy, IL 800-779-5438
 Rockford, IL 815-963-8340
 Minneapolis, MN 612-333-3066
 Rochester, MN 507-285-0251
 Kirksville, MO 800-779-5438
 Sioux Falls, SD 800-779-5438
 LaCrosse, WI 608-788-8410
 Madison, WI 608-222-3766

WORK DONE: Mount + install P.I.'s + Push Buttons
at all floors.

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☐ NO

WORK DONE BY:

Scott Evers / Levi Hankin

CUSTOMER:

[Signature]



Facilities Management
Design & Construction

TIME AND MATERIAL FORM
USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/11/18
Subcontractor SCHUMACHER ELEVATOR Change Order Request No. _____
Project Name MRF WATER DAMAGE REPAIR Project Number #0744901
Description of Work wiring, Machine Room work, Get rid of junk

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
Scott Egan			8						
Levi Hankin			8						
Cody Richert			8						
Mark Dahlstrom			5						

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) [Signature]
General Contractor's Representative [Signature]
Owner's Representative (Required) [Signature]

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Repair Job #: 39070 Elevator ID#:
Customer: U of IA MRF
Location: Iowa City, IA



Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
Dubuque 563-588-4863
Fort Dodge 515-576-7266
Iowa City 800-779-5438
Marshalltown 800-779-5438
Mason City 641-424-1307
Ottumwa 800-779-5438
Sioux City 712-258-3535
Waterloo 319-984-5676
Quincy, IL 800-779-5438
Rockford, IL 815-963-8340
Minneapolis, MN 612-333-3066
Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

WORK DONE: Wiring, Machine room work, Get rid of junk

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☐ NO

WORK DONE BY: Scott Blue / Levi Haukin

CUSTOMER: [Signature]

Date: 5-11-18 Notification #: Gold Ticket
Repair Job #: 39070 Elevator ID#:
Customer: U of IA MRF
Location: Iowa City, IA



Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
Dubuque 563-588-4863
Fort Dodge 515-576-7266
Iowa City 800-779-5438
Marshalltown 800-779-5438
Mason City 641-424-1307
Ottumwa 800-779-5438
Sioux City 712-258-3535
Waterloo 319-984-5676
Quincy, IL 800-779-5438
Rockford, IL 815-963-8340
Minneapolis, MN 612-333-3066
Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours	5			
Helper Hours	8			
Team Hours				
Travel Time				
Total Time	13			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

WORK DONE: Wiring, Machine Room work Get rid of junk

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☐ NO

WORK DONE BY: Mark Dahlstrom / Colly Richael

CUSTOMER: [Signature]

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

Description of Work Hall + control wiring

Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.
Mark Dahlstrom			8	
Levi Hanken			8	

Equipment and Material (attach invoices)

[illegible]

Owner's Representative (Required)

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 5-14-18 Notification #: _____Repair Job #: 39070 Elevator ID#: _____Customer: Medical Research FacilityLocation: Iowa City, IA

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	<u>8</u>			
Travel Time				
Total Time	<u>8</u>			



MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
Dubuque 563-588-4863
Fort Dodge 515-576-7266
Iowa City 800-779-5438
Marshalltown 800-779-5438
Mason City 641-424-1307
Ottumwa 800-779-5438
Sioux City 712-258-3535
Waterloo 319-984-5676
Quincy, IL 800-779-5438
Rockford, IL 815-963-8340
Minneapolis, MN 612-333-3066
Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

WORK DONE:

Hall + control wiring

MATERIAL	AMOUNT

WORK DONE BY: Mark Dahlstrom, Levi HankernCUSTOMER: JOB COMPLETED: ☐ YES ☒ NO

TIME AND MATERIAL FORM

Description of Work starting + adjusting

Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.
Mark Dahlstrom			8	
Levi Hunkeler			8	

Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.

Equipment and Material (attach invoices)

[illegible]

White=Contractor Copy
Yellow=Owner Copy
April, 2007

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 5-15-18 Notification #: _____
 Repair Job #: 39020 Elevator ID#: _____
 Customer: Medical Research Facility
 Location: Iowa City, IA

800-779-5438
Established in 1936

Schumacher
Elevator Company

One Schumacher Way
P.O. Box 393 - Denver, IA 50622

Cedar Rapids 319-362-1017
 Davenport 800-779-5438
 Denver 319-984-5676
 Des Moines 515-243-5487
 Dubuque 563-588-4863
 Fort Dodge 515-576-7266
 Iowa City 800-779-5438
 Marshalltown 800-779-5438
 Mason City 641-424-1307
 Ottumwa 800-779-5438
 Sioux City 712-258-3535
 Waterloo 319-984-5676
 Quincy, IL 800-779-5438
 Rockford, IL 815-963-8340
 Minneapolis, MN 612-333-3066
 Rochester, MN 507-285-0251
 Kirksville, MO 800-779-5438
 Sioux Falls, SD 800-779-5438
 LaCrosse, WI 608-788-8410
 Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours				
Helper Hours				
Team Hours	8			
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

WORK DONE:

Starting + Adjusting.

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☒ NO

WORK DONE BY:

Mark Dahlstrom, Levi Hanken

CUSTOMER:

[Signature]

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

Description of Work adjusting to counterweighting

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Date: 5-16-18

30B Invoice - Page 29 of 92

Repair Job #: 39070

Elevator ID#:

Customer: MRF

Location: Iowa City

800-779-5438
Established in 1936



Elevator Company

One Schumacher Way
P.O. Box 393 - Denver, IA 50622

Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
Dubuque 563-588-4863
Fort Dodge 515-576-7266
Iowa City 800-779-5438
Marshalltown 800-779-5438
Mason City 641-424-1307
Ottumwa 800-779-5438
Sioux City 712-258-3535
Waterloo 319-984-5676
Quincy, IL 800-779-5438
Rockford, IL 815-963-8340
Minneapolis, MN 612-333-3066
Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours	4			
Helper Hours				
Team Hours				
Travel Time				
Total Time	4			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

WORK DONE:

Remodel, Starting and Adjusting.

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☒ NO

WORK DONE BY:

Lyan Hayatz

CUSTOMER:

Date: 5-16-18

Notification #:

Repair Job #: 39070

Elevator ID#:

Customer: Medical Research Facility

Location: Iowa City, IA

800-779-5438
Established in 1936



Elevator Company

One Schumacher Way
P.O. Box 393 - Denver, IA 50622

Cedar Rapids 319-362-1017
Davenport 800-779-5438
Denver 319-984-5676
Des Moines 515-243-5487
Dubuque 563-588-4863
Fort Dodge 515-576-7266
Iowa City 800-779-5438
Marshalltown 800-779-5438
Mason City 641-424-1307
Ottumwa 800-779-5438
Sioux City 712-258-3535
Waterloo 319-984-5676
Quincy, IL 800-779-5438
Rockford, IL 815-963-8340
Minneapolis, MN 612-333-3066
Rochester, MN 507-285-0251
Kirksville, MO 800-779-5438
Sioux Falls, SD 800-779-5438
LaCrosse, WI 608-788-8410
Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours	8			
Helper Hours				
Team Hours				
Travel Time				
Total Time	8			

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

☐ Reorder Parts

WORK DONE:

Starting and adjusting

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☒ NO

WORK DONE BY:

Mark Dahlstrom

CUSTOMER:

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/17
Subcontractor SCHUMACHER ELEVATOR Change Order Request No _____
Project Name MRF WATER DAMAGE REPAIR Project Number # 0744901
Description of Work advising setting ready for inspection

Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.
Jason Anderson			8	-
Jeremy Engle			8	=

Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.

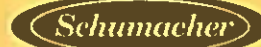
[illegible]

Owner's Representative (Required)

W31818/3-18

Date: 5-17-2018Job #: 39070

Elevator ID#:

Project Name: 4 of 1 MRFCity & State: Iowa City800-779-5438
Established in 1936

Elevator Company

One Schumacher Way
P.O. Box 393 - Denver, IA 50622

Cedar Rapids 319-362-1017
 Davenport 800-779-5438
 Denver 319-984-5676
 Des Moines 515-243-5487
 Dubuque 563-588-4863
 Fort Dodge 515-576-7266
 Iowa City 800-779-5438
 Marshalltown 800-779-5438
 Mason City 641-424-1307
 Ottumwa 800-779-5438
 Sioux City 712-258-3535
 Waterloo 319-984-5676
 Quincy, IL 800-779-5438
 Rockford, IL 815-963-8340
 Minneapolis, MN 612-333-3066
 Rochester, MN 507-285-0251
 Kirksville, MO 800-779-5438
 Sioux Falls, SD 800-779-5438
 LaCrosse, WI 608-788-8410
 Madison, WI 608-222-3766

HOURS	ST	1.5	1.7	DT
Mech. Hours	8			
Helper Hours	8			
Team Hours				
Travel Time	1			
Total Time				

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

WORK DONE: adjusted elevator

MATERIAL	AMOUNT

FOR OFFICE USE ONLY

☐ BILLABLE
 ☐ ALLOWANCE
 ☐ CHANGE ORDER
WORK DONE BY: J Andersen J EnselJOB COMPLETED: ☐ YES ☐ NO

WORK AUTHORIZED BY:

PRINTED NAME: _____

COMPANY REQUESTING WORK: _____

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

Description of Work performed elevator inspection & hauled
TEST weight

Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.
Jason Anderson			8	-
Jeremy Engel			8	-

Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.

Quantity	Description
	Performed electric inspection & hauled
	Waste

Owner's Representative (Required)

W27323/4-17

Date: 5-18-2018

Job #: 39070 Elevator ID#: _____

Project Name: UOFI MRF

City & State: IOWA city

HOURS	ST	1.5	1.7	DT
Mech. Hours	<u>8</u>			
Helper Hours	<u>8</u>			
Team Hours				
Travel Time	<u>1</u>			
Total Time				

WORK DONE: Detroned elevator
Inspection + hooked weights.

FOR OFFICE USE ONLY

☐ BILLABLE ☐ ALLOWANCE ☐ CHANGE ORDER

WORK DONE BY: S Anderson J Engel

800-779-5438
 Established in 1936



Elevator Company
 One Schumacher Way
 P.O. Box 393 - Denver, IA 50622

MISC. EXPENSES	AMOUNT
Expense Report	
Miles	
Parking	

Cedar Rapids 319-362-1017
 Davenport 800-779-5438
 Denver 319-984-5676
 Des Moines 515-243-5487
 Dubuque 563-588-4863
 Fort Dodge 515-576-7266
 Iowa City 800-779-5438
 Marshalltown 800-779-5438
 Mason City 641-424-1307
 Ottumwa 800-779-5438
 Sioux City 712-258-3535
 Waterloo 319-984-5676
 Quincy, IL 800-779-5438
 Rockford, IL 815-963-8340
 Minneapolis, MN 612-333-3066
 Rochester, MN 507-285-0251
 Kirksville, MO 800-779-5438
 Sioux Falls, SD 800-779-5438
 LaCrosse, WI 608-788-8410
 Madison, WI 608-222-3766

MATERIAL	AMOUNT

JOB COMPLETED: ☐ YES ☐ NO

WORK AUTHORIZED BY: [Signature]

PRINTED NAME: _____

COMPANY REQUESTING WORK: _____

Schumacher Non-Labor Cost

Iowa Division of Labor
Elevator Safety
1000 East Grand Avenue
Des Moines, IA 50319-0209
Phone: 515-281-5415
Fax: 515-242-5076
elevators@iwd.iowa.gov
iowaelevators.gov

APPLICATION FOR INSTALLATION OR ALTERATION PERMIT

MAR 16 2018

FOR OFFICE USE ONLY

Date Received: _____
☐ Approved ☐ Denied
 Date: _____ By: _____
 Permit #: _____
 Comments: _____

INSTRUCTIONS

Please type or print clearly. No installation or alteration shall begin until a permit has been issued. Submit a separate form for each conveyance. Submit a complete application package in order to prevent delays. Alterations require drawings and specifications for all planned changes. New installations require three copies of the project details set forth in 875 IAC 71.5.

Fee Schedule:

- | | | |
|---|---|---|
| <input type="checkbox"/> Traction Elevator Installation: \$1,000.00 | <input type="checkbox"/> Hydraulic Elevator Installation: \$750.00 | <input checked="" type="checkbox"/> Elevator Alteration: \$500 |
| <input type="checkbox"/> Escalator Installation: \$1,000.00 | <input type="checkbox"/> Escalator Skirt Brush Alteration: \$500.00 | <input type="checkbox"/> Other Escalator Alteration: \$1,000.00 |
| <input type="checkbox"/> Wheelchair Lift Installation: \$500.00 | <input type="checkbox"/> Wheelchair Lift Alteration: \$500.00 | <input type="checkbox"/> Dumbwaiter Alteration: \$500.00 |
| <input type="checkbox"/> Dumbwaiter Installation: \$500.00 | <input type="checkbox"/> Print Revision: \$100.00 | <input type="checkbox"/> Permit Extension: \$100.00 |

Application Type: ☐ New Installation ☒ Alteration
☐ Complete Replacement of Existing Equipment ☐ Skirt Brush Alteration

Owner's Name UNIVERSITY OF IOWA		Owner's Address 202 PCO			
City IOWA CITY		State IA	Zip 52242-250	Phone 319-335-0115	
Building Name MEDICAL RESEARCH FACILITY		Conveyance Address 55 GRAND AVE SOUTH		City IOWA CITY	County JOHNSON
Conveyance Contractor Schumacher Elevator Co		Contact Mark Traetow	Email	Phone 316-406-1205	
Address One Schumacher Way		City Denver		State IA	Zip 50622
General Contractor Woodruff Construction, LLC		Contact Nick Ford	Email nickf@woodruffcompanies.com	Phone 515-232-4535	
Address 1890 Kountry Lane		City Fort Dodge		State IA	Zip 50501
Date Conveyance Contract Signed 1/29/2018		Owner ID (Example: North Car #1) Car #5			

General

State Tag Number: 206	Installation Code Year:	Alteration Code Year:	Number of Landings: 6	Number of Front Openings: 6	Number of Rear Openings: 0
Rated Load: 4,000 Pounds	Rated Speed: 300 Feet per Minute	Contractor Job Number: RJ# 39070		MRL: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Type of Equipment: <input checked="" type="checkbox"/> Passenger <input type="checkbox"/> Freight A <input type="checkbox"/> Freight B <input type="checkbox"/> Freight C1 <input type="checkbox"/> Freight C2 <input type="checkbox"/> Freight C3 <input type="checkbox"/> Sidewalk <input type="checkbox"/> Limited Use (LULA) <input type="checkbox"/> Special Purpose <input type="checkbox"/> Moving Walk <input type="checkbox"/> Dumbwaiter <input type="checkbox"/> Material Lift <input type="checkbox"/> Escalator <input type="checkbox"/> Vertical Platform Lift <input type="checkbox"/> Inclined Platform Lift <input type="checkbox"/> Restricted (alteration only)					
Type of Drive Unit: <input type="checkbox"/> Cable Ball and Socket <input type="checkbox"/> Chain (Electric) <input type="checkbox"/> Chained Hydraulic <input type="checkbox"/> Rack and Pinion <input type="checkbox"/> Roped Hydraulic <input type="checkbox"/> Direct Hydro <input type="checkbox"/> Screw <input checked="" type="checkbox"/> Traction <input type="checkbox"/> Winding Drum <input type="checkbox"/> Other: _____					
Type of Hoistway Doors: EXISTING		Type of Car Doors:		Number of Ropes:	Size of Ropes: →
Manufacturer: DOVER/O'KEEFE		Manufacturer Serial #:		Manufacturer Model # and Model Name:	

Equal Opportunity Employer/Program
 Auxiliary aids and services are available upon request to individuals with disabilities.
 For deaf and hard of hearing, use Relay 711.

Kzm

AAA Labor Cost



AAA MECHANICAL CONTRACTORS INC.

PLUMBING | HEATING | AIR CONDITIONING | REFRIGERATION
P.O. Box 805 | Iowa City, IA 52244
ph. 319-351-1843 | fax 319-351-0747
www.aaamech.com



May 24, 2018

Woodruff Construction, LLC
Attn: Leon Zhang
1890 Kountry Lane
Fort Dodge, Iowa 50501

RE: MRF Water Damage – Pay Application Summary

SUBJ: Pay App#2

Leon,

For Labor not billed on original Pay Application #1 from period 01/10 – 02/09, 2018. Employee time sheet is included for review.

Sincerely,

Jeff Koeppel
President

AAA MECHANICAL CONTRACTORS, INC.

EMPLOYEE NAME

Greg Murphy

JOB NO.

TM 111263

COMMERCIAL • INDUSTRIAL • INSTITUTIONAL

EMPLOYEE I.D. 3440
(OFFICE USE)

JOB NAME

MRF Walk-thru

THURSDAY		FRIDAY		SATURDAY		SUNDAY		MONDAY		TUESDAY		WEDNESDAY		WEEK ENDING	CLASS TOTAL		
REGULAR	O.T.	REGULAR	O.T.	O.T.	D.T.	O.T.	D.T.	REGULAR	O.T.	REGULAR	O.T.	REGULAR	O.T.	1-24-78	REGULAR	O.T.	D.T.
														101 WATERMAIN			
														102 UTILITIES			
														103 UNDERGROUND SANITARY			
														104 UNDERGROUND STORM			
														105 ABOVE WASTE & VENT			
														106 ABOVE STORM			
														107 ACID WASTE			
														108 DOMESTIC WATER			
														109 STEAM & CONDENSATE			
1														110 HOT WATER			
														111 CHILLED WATER			
														112 GAS			
														113 REFRIGERATION			
														114 PLUMBING FIXTURES			
														115 HVAC EQUIPMENT			
														116 DEMOLITION			
														117 CORE DRILLING			
														118 MEDICAL GAS			
														119 AIR PIPING			
														120			
														121			
														122			
														123			
														124			
														125			
														126			
														127			
														128			
														129			
														130 SHOP LABOR			
														131 UTILITY LABOR			
Notes:														TOTAL HOURS WORKED	1		



P O Box 805
Iowa City, IA 52244
Phone: 319-351-1843 Fax: 319-351-0747

Invoice #: TMI1263#2
Invoice Date: 05/24/18

Work Location:

The University of Iowa
MRF

Date	Your Order #	Your P. O. #	Call In By:	Terms
05/24/2018				Net 30

Project: MRF Water Damage
Initial Walk-through to Determine what Repairs Needed to be Made

1 hr. @ \$76.89 Foreman Greg Murphy

Quantity	Description	Unit Price	Total
		LABOR	\$76.89
		MATERIAL	
		FREIGHT	
		SUBCONTRACTOR	
		Balance Due	\$76.89

AE Labor Cost



ADVANCED ELECTRICAL SERVICES INC.
 dba ADVANCED BORETEK
 1233 GILBERT COURT
 IOWA CITY, IA 52240
 PH: 319-351-6452

INVOICE

56237

INVOICE NUMBER

CUSTOMER

WOODRUFF CONSTRUCTION
 1890 KOUNTY LANE
 FORT DODGE, IA 50501

DATE

05/24/2018

REFERENCE

AS PER NICK

TELEPHONE

29306

UA

106997

WOODRU

Soldby:

JOB LOCATION

JOB DETAILS

UI - MRF

REPAIR FLOOD DAMAGE AS DIRECTED

Monthly finance charge of 1.5%, if not paid within 30 days of invoice date. Customer will be responsible for all costs, including court & attorney's fees, incurred by Advanced Electrical Services, Inc. in the collection of customer's past due account.

Material / Work Description**Charge**

AS PER MARK'S REQUEST WE WENT TO THE SITE TO REVIEW ELEVATOR
 PHONE LIGHTS.

04/13: TREVOR BERTELLI 1 HOUR \$60.00

Material Total

.00

Labor / Work Description**Charge**

Labor Provided

60.00

Labor Total

60.00

Page 1

**PAY THIS
 AMOUNT**

\$

60.00

PLEASE DETACH THIS PORTION & RETURN WITH YOUR REMITTANCE TO:

Advanced Electrical Services, Inc.
 1233 Gilbert Court
 Iowa City, IA 52240

CUSTOMER: WOODRUFF CONSTRUCTION
 CUST. NO. 106997 Inv #: 56237

DATE: 05/24/2018

**PAY THIS
 AMOUNT**

\$

60.00

TERMS: DUE UPON RECEIPT

Bachmeier Labor Cost



Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO.

Date Work Performed 5/16/18

Subcontractor BACHMEIR CARPET I

Change Order Request No. _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work INSTALL FLOORING IN ELEVATOR

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
<u>Rock Klemm</u>			<u>3.5</u>						
<u>Trevor Cass</u>			<u>3.5</u>						

Equipment and Material (attach invoices)

Quantity	Description
<u>1/2 GAL</u>	<u>Blue</u>
<u>12'</u>	<u>AIR COMPRESSOR</u>
	<u>METAL TRANSITION PL.</u>

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

THE UNIVERSITY OF IOWA

LABOR RATE BREAKDOWN FOR UIHC MRF ELEVATOR FLOOR INSTALL

	FOREMAN	JOURNEYMAN	
BASE WAGE	3.5 X \$50.00	3.5 X \$35.00	
LABOR	\$175.00	\$122.50	TOTAL=\$297.50

CONTRACTOR---BACHMEIER CARPET ONE
TRADE---FLOOR COVERING

PREPARED BY---MATT LANGENBERG
MATT@BACHMEIERCARPETONE.COM

Bachmeier Non Labor Cost



BACHMEIER CARPET ONE
3402 MERCHANT ST
CORALVILLE, IA 52241
319-545-5678

Page 1

CG800604

ACKNOWLEDGMENT

Sold To

WOODRUFF CONSTRUCTION CO
1890 KOUNTRY LANE
FORT DODGE, IA 50501

Ship To

UIHC
MRF BUUILDING
IOWA CITY, IA 52240

Order Date	Tele #1	PO Number	Order Number		
05/07/18	515-576-1118	MRF 2-5	CG800604		
Inventory	Style/Item	Color/Description	Quantity Units	Price	Extension
CG8006040001	MARMOLEUM REAL	3048 GRAPHITE	55.76 SF	4.93	274.90
ADHESIVE	L885	GALLON	1.00 EA	59.37	59.37
CTU-2532	BIRCH 1/4" UNDERLAYMENT	N/A	64.00 SF	1.11	71.04
Carton Qty: 2.00					
12-1642	1 1/2" SILVER CARPET BAR	SILVER FLAT METAL	1.00 FT	24.50	24.50

Terms: Payment due upon receipt of invoice. Invoices unpaid after 30 days will incur a finance charge of 1.5% monthly.

Any unforeseen floor prep not included in bid.

— 05/24/18 —

— 12:04PM —

Sales Representative(s):

MATT LANGENBERG

Material: 429.81

Service: 0.00

Misc. Charges: 0.00

Sales Tax: 0.00

Misc. Tax: 0.00

Thank you for your business!

Store Hours:

Monday, Thursday 8am-7pm

Tuesday, Wednesday, Friday 8am-6pm

Saturday 10am-4pm

INVOICE TOTAL: \$429.81

Less Payment(s): 0.00

BALANCE DUE: \$429.81

G702 APPLICATION and CERTIFICATE for PAYMENT

To: Woodruff Construction LLC
1890 Country Lane
Fort Dodge Ia 50501

Project: MRF Water Damage Repair

Application No: 1

Distribution to:

App. Date: May 30, 2018

Period to: May 30, 2018

Project No:

Contract Date:

☐ OWNER
☐ CONSTRUCTION MGR.
☐ ARCHITECT
☐ CONTRACTOR
☐ OTHER

From: Corridor Paint & Drywall INC
1639 Edgewood RD SW
Cedar Rapids IA 52404

Contract For: Painting

Via Architect:

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract. Continuation Sheet, G703, is attached.

1. ORIGINAL CONTRACT SUM

5,633.22

2. Net Change By Change Orders

3. CONTRACT SUM TO DATE

5,633.22

4. TOTAL COMPLETED AND STORED TO DATE

5,633.22

5. RETAINAGE:

a. of Completed Work

0.00

b. of Stored Material

0.00

TOTAL RETAINAGE

0.00

6. TOTAL EARNED LESS RETAINAGE

5,633.22

7. LESS PREVIOUS CERTIFICATES FOR PAYMENT

0.00

8. CURRENT PAYMENT DUE

5,633.22

9. BALANCE TO FINISH, INCLUDING RETAINAGE

0.00

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

CONTRACTOR:

By:

Date: May 30, 2018

ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising this application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED

(Attach explanation if amount certified differs from the amount applied for. Initial all figures on this Application and on the Continuation Sheet that are changed to conform to the amount certified.)

ARCHITECT:

By:

Date:

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
Total changes approved in previous months by Owner		
Total approval this Month		
TOTALS		
NET CHANGES by Change Order		

CONTINUATION SHEET G703

PROJECT: MRF Water Damage Repair

Corridor Paint & Drywall INC

Page 1 of 1

Document G702, APPLICATION AND CERTIFICATE FOR PAYMENT, containing Contractor's signed Certification is attached.

Application No: 1

App. Date: May 30, 2018

Period to: May 30, 2018

Use Column I on Contracts where variable retainage for line items may apply.

Project No:

A Item #	B Description of Work	C Schedule of Values	D Work Completed		F Materials Stored & Used Prior + Current	G		H Balance to Finish	I Retainage
			From Previous Application(s)	This Period		Total Completed and Stored To Date	%		
1	Labor estimate	4,582.00		4,582.00		4,582.00	100.00	0.00	0.00
2	Material estimate	1,051.22		1,051.22		1,051.22	100.00	0.00	0.00
3									
4									
5									
6									
7									
8									
9									
10									

GRAND TOTAL:	5,633.22		5,633.22		5,633.22	100.00	0.00	0.00
--------------	----------	--	----------	--	----------	--------	------	------

A=Line Item Number B=Brief Item Description C=Total Value of Item D=Total of D and E From Previous Application(s) (If Any) E=Total Work Completed For This Application
 F=Materials Purchased and Stored for Project G=Total of All Work Completed and Materials Stored for Project H=Remaining Balance of Amount to Finish I=Amount Withheld from G

Corridor Non Labor Cost

CORRIDOR
PAINT &
DRYWALL

COMMERCIAL ~ INDUSTRIAL ~ PAINTING ~ DRYWALL

May 25, 2018

Woodruff Construction
Attn: Leon

RE: MRF Water Damage – Pay Application #2 Summary

Subject: Pay App #2

For all work from 1/16 – 5/18. The total amount for Corridor Paint & Drywall work is **\$5633.22**. Labor and material cost documents are enclosed for review.

If you require additional clarification please contact me or Ryan. Thank you for your prompt response.

Thank you,

Corridor Paint & Drywall



Corridor Paint & Drywall Inc

1639 Edgewood Rd SW
Cedar Rapids, IA 52404
USA

Voice: 319-362-2368
Fax: 319-362-2369

INVOICE

Invoice Number: 1699
Invoice Date: May 24, 2018
Page: 1
Duplicate

Bill To:

Woodruff Construction
1890 Kountry Lane
Fort Dodge, IA 50501

Ship to:

Woodruff Construction
1890 Kountry Lane
Fort Dodge, IA 50501

Customer ID	Customer PO	Payment Terms	
WOODRUFF		Net 30 Days	
Sales Rep ID	Shipping Method	Ship Date	Due Date
	Airborne		6/23/18

Quantity	Item	Description	Unit Price	Amount
1.00		MRF Water Damage - Materials		
1.00		1/19/18 FBM #43125221-00	3.10	3.10
1.00		1/19/18 Sherwin Williams #7831-7	63.13	63.13
1.00		1/19/18 Tamarack #6527642-00	36.00	36.00
1.00		1/30/18 Sherwin Williams #8058-6	171.15	171.15
1.00		1/31/18 Sherwin Williams #8091-7	17.41	17.41
1.00		2/1/18 Sherwin Williams #8151-9	18.46	18.46
1.00		2/05/18 Sherwin Williams #8256-6	89.73	89.73
1.00		2/08/18 Sherwin Williams #8327-5	131.04	131.04
1.00		3/27/18 Sherwin Williams #9458-6	129.97	129.97
1.00		3/28/18 Sherwin Williams #0429-4	39.24	39.24
1.00		3/28/18 Sherwin Williams #0434-4	86.25	86.25
1.00		3/30/18 Sherwin Williams #9606-0	109.78	109.78
1.00		5/14/18 Sherwin Williams #1291-0	116.36	116.36
1.00		5/18/18 Sherwin Williams #2919-2	39.60	39.60

Tax no included

Check/Credit Memo No:

Subtotal	1,051.22
Sales Tax	
Total Invoice Amount	1,051.22
Payment/Credit Applied	
TOTAL	1,051.22

INVOICE



Foundation Building Materials

RETURN SERVICE REQUESTED

Founded on Principle • Built with Purpose

 BRANCH 0043
 55 43RD AVE SW
 CEDAR RAPIDS IA 52404-4908
 (319) 362-4033 PH
 (319) 247-2599 FX

INVOICE NUMBER		INVOICE DATE	
43125221-00			
CUSTOMER PO#		ORDERED BY	
TERMS	DUE DATE	CUSTOMER #	
DUE ON RCPT		243	
PLEASE REMIT ALL PAYMENTS TO:			
PLEASE REMIT ALL PAYMENTS TO: FOUNDATION BUILDING MATERIALS 1125 HARRISON AVE ROCKFORD IL 61104-7239			

BILL TO:

CASH CUSTOMER-CEDAR RAPIDS IA

SHIP TO:

CASH CUSTOMER-CEDAR RAPIDS IA

ORDER DATE		ORDER TAKEN BY		SHIP VIA	SHIP DATE	JOB NUMBER / NAME		
01/19/18		Albers, Doug		Cust Pick Up	01/19/18			
QUANTITY ORDERED	QUANTITY SHIPPED	SELL UNIT	ITEM NUMBER ITEM DESCRIPTION		PRICE UNIT QUANTITY	UNIT PRICE	PRICE UOM	NET AMOUNT DUE
1	1	PC	1A10-PC #1A 10' STANDARD	EXP (30/CTN)	1.000	3.10	PC	3.10

Please reference the invoice number with your payment.

Finance charge of 1-1/2% per month (18% per year) will be charged on all past due accounts.
 Claims and returned goods MUST be accompanied by appropriate paperwork.
 It is the contractor's responsibility, including ingress and egress.

 Sub-Total
 Taxes
 Downpayment
 Invoice Total

 3.10
 0.22
 3.32
 \$0.00

Thank You

THE SHERWIN WILLIAMS CO.
3501 J ST SW
CEDAR RAPIDS IA 52404



SHERWIN-WILLIAMS.

ACCOUNT: 6752-2375-4

Visit www.sherwin-williams.com
Store 3527
(319) 364-5036

CHARGE INVOICE No. 7831-7

JOB 01 CORRIDOR PAINT & DRYWALL

SHIPPED TO:

PAGE 1 OF 1
PO# MRF
ORDER: OE0124931Q3527
DATE: 01/19/2018
TIME: 07:29 AM
2-6536
E01/14688

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318

RYAN HAJEK
(319) 362-2368

(319) 362-2368

* INDICATES SALE PRICE

TERMS: NET PAYMENT DUE ON FEB. 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
6501-87206	GALLON	B31W2651	PM 200 0 SG EXTRA Custom: MATCH CCE*Color Cast	1	18.25	18.25
			OZ 32 64 128			
			B1 Black - 1 1 -			
			N1 Raw Umber - 3 - -			
			Y3 Deep Gold - - - 1			
			Custom Sher-Color Match			
6501-87206	GALLON	B31W2651	MATCH PM 200 0 SG EXTRA Custom: MATCH CCE*Color Cast	1	18.25	18.25
			OZ 32 64 128			
			B1 Black - 4 - -			
			Y3 Deep Gold - 17 - 1			
			Custom Sher-Color Match			
172-2297	EACH	137202	MATCH CP66SW-48MM MASKTAPE	1	2.75*	2.75
482-8133	2 INCH	PG29..24R	PG29 PREMIUM 48MM	1	4.68	4.68
161-9337	EACH		9X400' .31MLHD PLAS	1	22.59	22.59
			DISCOUNT (% 15.00)			-3.39
			MFG NBR:HSSW09-400			

Thank You
receipt required for refund

SUBTOTAL BEFORE TAX
7.000% SALES TAX:1-165240500
CHARGE

63.13
4.42
\$67.55

SIGNED PACKING SLIP # 78317 VERIFIES MERCHANDISE WAS RECEIVED IN GOOD ORDER BY:
MIKE

IT'S OUR POLICY

- Customer satisfaction guaranteed on every product we sell.
- Merchandise (other than tinted paint) may be returned in good condition with proof of purchase within 30 days.
- Small deposit required on all special orders.
- 75% refund on returns of special ordered wallcovering. Sorry, cut rolls not returnable.
- Freight extra on blinds & wallpaper book orders.
- A service fee will be charged for all returned checks. See Store Manager for details.

L-2 plaster patch

74.31

TAMARACKMATERIALS, INC.
www.tamarackmaterials.com00 James Ave. S.
Bloomington, MN 55431
Tel: (952) 888-5556
Fax: (952) 888-4030Bloomington Acoustical
(952) 888-5556**MINNESOTA**Cedar, MN (763) 784-6665
Duluth, MN (218) 729-8075
Rochester, MN (507) 280-8800
St Joseph, MN (320) 363-4442**NORTH DAKOTA**Bismarck, ND (701) 258-0756
Minot, ND (701) 838-0756
West Fargo, ND (701) 282-0470**SOUTH DAKOTA**

Sioux Falls, SD (605) 335-7800

WISCONSIN

New Richmond, WI (715) 246-4040

IOWA

Iowa City, IA (319) 337-3033

Tamarack Materials, Inc.
SDS 12-1200
P.O. Box 86
Minneapolis, MN 55486-1200

REMIT TO

Birmingham Acoustical		West Fargo, ND (701) 282-0470		Customer No.		Date		Order Number		
(2) 888-5556				10074				6527642-00		
Order Date	Customer P.O. Number	Customer Job No.	Ordered By	Entered By	Reqd Ship Date	Date Shipped	Sales Rep	Page No.		
1/19/18	CASH CUSTOMER IOWA CITY			jap	01/19/18	01/19/18	ICHS	1 of 1		
			Special Instructions						[1]	

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CASH CUSTOMER IOWA CITYS
H
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CASH CUSTOMER IOWA CITY

Product No.	Quantity	Units	Description	U/M	Extension	Unit price	Amount
RLITE50	2	BAG	STRUCTOLITE PLASTER 50#40 BAGS/PALLET	BAG	2	18.00	36.00

Tax Details	Received By	Delivered By	Totals
able: Yes Iowa Johnson - Iowa City		IOWA CITY YARD	SUBTOTAL 36.00 TAX 2.16 ADD'L CHARGES 0.00 TOTAL 38.16
Thank You			Payments Visa/MC/DISC 38.16

TERMS: NET 20TH. OR AS OTHERWISE ARRANGED. INTEREST RATE OF 1.5% PER MONTH (WHICH IS A RATE OF 18% PER YEAR) COMPUTED MONTHLY WILL BE
 CHARGED ON THE UNPAID BALANCE. CUSTOMER AGREES TO PAY BY CASH, CHECK, OR ACH. CUSTOMERS PAYING THEIR ACCOUNT WITH A CREDIT CARD
 INCUR A SURCHARGE OF 2.0% ON THE TRANSACTION AMOUNT, WHICH IS NOT GREATER THAN TAMARACK MATERIALS COST OF ACCEPTANCE.

RETURN CHARGE ON STOCK MERCHANDISE. SPECIAL ORDERS ARE NOT RETURNABLE.

TAMARACK MATERIALS INC. HEREBY REQUESTS PURSUANT TO MINNESOTA STATUTES SECTION 514.011 (3) THAT YOU SUPPLY TO IT, WITHIN TEN (10) DAYS
 THE DATE OF THIS INVOICE, THE NAME AND ADDRESS OF THE OWNER WHOSE PROPERTY IS BEING IMPROVED BY THE MATERIALS YOU HAVE ORDERED.

GYPSUM WALLBOARD, PLASTER, STUCCO, STO/EIFS, JOINT COMPOUND, INSULATION, METAL STUDS, METAL LATH, METAL ACCESS DOORS,
 DRYWALL SCREWS, DRYWALL TOOLS, CEILING TILE AND GRID, FRY REGLET TRIMS, FRP, SCAFFOLDING, SAFETY EQUIPMENT AND MORE

THE SHERWIN WILLIAMS CO.
3501 J ST SW
CEDAR RAPIDS IA 52404



SHERWIN-WILLIAMS

Visit www.sherwin-williams.com
Store 3527
(319) 364-5036

CHARGE INVOICE No. 8058-6

ACCOUNT: 6752-2375-4

JOB 01 CORRIDOR PAINT & DRYWALL

PAGE 1 OF 1
PO# MRF
ORDER: OE0125303A3527
DATE: 01/30/2018
TIME: 06:35 AM
2-6536
E02/14688

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318

(319) 362-2368

TERMS: NET PAYMENT DUE ON FEB. 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
6501-87206	GALLON	B31W2651	PM 200 0 SG EXTRA Custom: MATCH CCE*Color Cast	2	18.25	36.50
			OZ 32 64 128			
			B1 Black - 4 - -			
			Y3 Deep Gold - 17 - 1			
			Custom Sher-Color Match			
6501-87214	5 GAL	B31W2651	MATCH PM 200 0 SG EXTRA Custom: MATCH CCE*Color Cast	5	17.25	86.25
			OZ 32 64 128			
			B1 Black - 7 1 -			
			N1 Raw Umber - 15 - -			
			Y3 Deep Gold - 1 - 1			
			Custom Manual Match			
598-7821	EACH	9003048	MATCH 5GAL PAIL LINER	4	4.49	17.96
6503-60225	9 INCH	140678093	DISCOUNT (% 15.00)			-2.69
			9 ULTRA FINISH 1/2 C	2	7.09	14.18
			DISCOUNT (% 15.00)			-2.13
180-1281	EACH	99074299	4-SIDED HD 5GL GRID	2	2.96	5.92
161-4585	EACH	99999	5GPL GRAY W/LID/TINT	1	7.84	7.84
461-3667	EACH	PG29..23R	PG29 PREMIUM 36MM	2	3.66	7.32

Thank You
receipt required for refund

SUBTOTAL BEFORE TAX 171.15
7.000% SALES TAX: 1-165240500 11.98
CHARGE \$183.13

171.15
11.98
\$183.13

SIGNED PACKING SLIP # 80586 VERIFIES MERCHANDISE WAS RECEIVED IN GOOD ORDER BY:
TIM

IT'S OUR POLICY

- Customer satisfaction guaranteed on every product we sell.
- Merchandise (other than tinted paint) may be returned in good condition with proof of purchase within 30 days.
- Small deposit required on all special orders.
- 75% refund on returns of special ordered wallcovering. Sorry, cut rolls not returnable.
- Freight extra on blinds & wall paper book orders.
- A service fee will be charged for all returned checks. See Store Manager for details.

THE SHERWIN WILLIAMS CO.
3501 J ST SW
CEDAR RAPIDS IA 52404



SHERWIN-WILLIAMS

ACCOUNT: 6752-2375-4

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318

(319) 362-2368

Visit www.sherwin-williams.com
Store 3527
(319) 364-5036

JOB 01 CORRIDOR PAINT & DRYWALL

SHIPPED TO:

RYAN HAJEK
(319) 362-2368

CHARGE INVOICE No. 8091-7

PAGE 1 OF 1
PO# MRF

DATE: 01/31/2018
TIME: 06:11 AM
2-6536
E02/14688

TERMS: NET PAYMENT DUE ON FEB. 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
155-8899	QUART	31901-4	SPACKLING PASTE	1	10.09	10.09
461-3667	EACH	PG29..23R	PG29 PREMIUM 36MM	2	3.66	7.32

Thank You
receipt required for refund

SUBTOTAL BEFORE TAX
7.000% SALES TAX: 1-165240500
CHARGE

17.41
1.22
\$18.63

20.47

SIGNED PACKING SLIP # 80917 VERIFIES MERCHANDISE WAS RECEIVED IN GOOD ORDER BY:
TIM

IT'S OUR POLICY

- Customer satisfaction guaranteed on every product we sell.
- Merchandise (other than tinted paint) may be returned in good condition with proof of purchase within 30 days.
- Small deposit required on all special orders.
- 75% refund on returns of special ordered wallcovering. Sorry, cut rolls not returnable.
- Freight extra on blinds & wallpaper book orders.
- A service fee will be charged for all returned checks. See Store Manager for details.

THE SHERWIN WILLIAMS CO.
3501 J ST SW
CEDAR RAPIDS IA 52404



SHERWIN-WILLIAMS

ACCOUNT: 6752-2375-4

Visit www.sherwin-williams.com
Store 3527
(319) 364-5036

JOB 01 CORRIDOR PAINT & DRYWALL

CHARGE INVOICE No. 8151-9

PAGE 1 OF 1
PO# MRF
ORDER: OE0125398A3527
DATE: 02/01/2018
TIME: 06:17 AM
2-6536
E02/14688

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318

(319) 362-2368

TERMS: NET PAYMENT DUE ON MAR. 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
6502-68683	QUART	B31W1151	PROCL LTX SG EXTRA	1	18.46	18.46
			Custom: MATCH			
			CCE*Color Cast	OZ 32 64 128		
			B1 Black	- 1 - 1		
			Y3 Deep Gold	- 7 1 -		
			Custom Sher-Color Match			
			MATCH			

Thank You
receipt required for refund

SUBTOTAL BEFORE TAX
7.000% SALES TAX: 1-165240500
CHARGE

18.46
1.29
\$19.75



SIGNED PACKING SLIP # 81519 VERIFIES MERCHANDISE WAS RECEIVED IN GOOD ORDER BY:
TIM

IT'S OUR POLICY

- Customer satisfaction guaranteed on every product we sell.
- Merchandise (other than tinted paint) may be returned in good condition with proof of purchase within 30 days.
- Small deposit required on all special orders.
- 75% refund on returns of special ordered wallcovering. Sorry, cut rolls not returnable.
- Freight extra on blinds & wallpaper book orders.
- A service fee will be charged for all returned checks. See Store Manager for details.

THE SHERWIN WILLIAMS CO.
3501 J ST SW
CEDAR RAPIDS IA 52404



SHERWIN-WILLIAMS

ACCOUNT: 6752-2375-4

Visit www.sherwin-williams.com
Store 3527
(319) 364-5036

JOB 72 MRF

SHIPPED TO:

CHARGE
INVOICE

No. 8256-6

TRC# 638964

PAGE 1 OF 1

PO# MRF

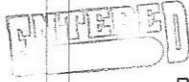
DATE: 02/05/2018

TIME: 03:40 PM

2-6536

E01/14688

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318



RYAN HAJEK
(319) 362-2368

(319) 362-2368

* INDICATES SALE PRICE

TERMS: NET PAYMENT DUE ON MAR. 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
594-4731	EACH		BRICK WHITE RAGS MED DISCOUNT (% 15.00)	1	15.29	15.29
959-8632	EACH		MFG NBR:6416-BR05-SW PROGRADE 5" DISC 220 DISCOUNT (% 15.00)	1	12.49	12.49N
959-8665	EACH		MFG NBR:88525NA-9-B PROGRADE 5" DISCS DISCOUNT (% 15.00)	1	12.49	12.49N
6509-51924	EACH		MFG NBR:88523NA-9-B PREM 10IN1 FOLDING T	1	10.75*	10.75
6508-65330	EACH	13040	GLASS SCRAPER 5BLDS DISCOUNT (% 15.00)	1	3.99	3.99
6509-34581	EACH	7008-26	CUT RESISTANT GLOVE DISCOUNT (% 15.00)	1	9.99	9.99
6509-90427	EACH	88252-26	SW NITRILE GLOVE 1PK	4	2.50*	10.00
154-8775	GALLON	R6K9	ACETONE-GAL-SW DISCOUNT (% 15.00)	1	26.89	26.89N
						-4.03

Thank You
receipt required for refund

SUBTOTAL BEFORE TAX
7.000% SALES TAX:1-165240500
CHARGE

89.73
3.19
\$92.92

100.00

9.89

100.00

SIGNED PACKING SLIP # 82566 VERIFIES MERCHANDISE WAS RECEIVED IN GOOD ORDER BY:
RYAN

IT'S OUR POLICY

- Customer satisfaction guaranteed on every product we sell.
- Merchandise (other than tinted paint) may be returned in good condition with proof of purchase within 30 days.
- Small deposit required on all special orders.
- 75% refund on returns of special ordered wallcovering. Sorry, cut rolls not returnable.
- Freight extra on blinds & wallpaper book orders.
- A service fee will be charged for all returned checks. See Store Manager for details.

THE SHERWIN WILLIAMS CO.
3501 J ST SW
CEDAR RAPIDS IA 52404

30B Invoice - Page 59 of 92



SHERWIN-WILLIAMS

ACCOUNT: 6752-2375-4

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318

(319) 362-2368

Visit www.sherwin-williams.com
Store 3527
(319) 364-5036

JOB 72 MRF

SHIPPED TO:

RYAN HAJEK
(319) 362-2368

CHARGE
INVOICE

No. 8327-5

TRC# 638964

PAGE 1 OF 2

PO# MRF

ORDER: OE0125613Q3527

DATE: 02/08/2018

TIME: 06:18 AM

2-6536

E01/14688

TERMS: NET PAYMENT DUE ON MAR. 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
6508-76220	GALLON	B41W2651	PM 200 0 LG EG EW Custom: MATCH 491 CCE*Color Cast B1 Black R2 Maroon Y3 Deep Gold Custom Sher-Color Match 491	1	14.11	14.11N
6508-76220	GALLON	B41W2651	PM 200 0 LG EG EW Custom: MATCH 476,485,482 CCE*Color Cast B1 Black R2 Maroon Y3 Deep Gold Custom Sher-Color Match 476,485,482	2	14.11	28.22N
6508-76220	GALLON	B41W2651	PM 200 0 LG EG EW Custom: MATCH 473 CCE*Color Cast B1 Black Y3 Deep Gold Custom Sher-Color Match 473	1	14.11	14.11N
6508-76220	GALLON	B41W2651	PM 200 0 LG EG EW Custom: MATCH 474,468 CCE*Color Cast Y1 Yellow Y3 Deep Gold Custom Sher-Color Match 474,468	1	14.11	14.11N
165-0563	EACH	05GLSWB	5 GL BLUE PAIL SW DISCOUNT (% 15.00)	1	4.75	4.75
598-7821	EACH	9003048	5GAL PAIL LINER DISCOUNT (% 15.00)	6	4.60	-0.71
180-1281	EACH	99074299	4-SIDED HD 5GL GRID	6		27.60
6503-60225	9 INCH	140678093	9 ULTRA FINISH 1/2 C DISCOUNT (% 15.00)	3	2.96	-4.14
				4	7.09	8.88
						28.36
						-4.25

Thank You
receipt required for refund

SUBTOTAL BEFORE TAX
7.000% SALES TAX:1-165240500
CHARGE

131.04
4.23
\$135.27

13.53

158.80

L-485 Room Batches

THE SHERWIN WILLIAMS CO.
3501 J ST SW
CEDAR RAPIDS IA 52404

30B Invoice - Page 60 of 92



SHERWIN-WILLIAMS.

ACCOUNT: 6752-2375-4

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318

(319) 362-2368

Visit www.sherwin-williams.com
Store 3527
(319) 364-5036

JOB 72 MRF

SHIPPED TO:

RYAN HAJEK
(319) 362-2368

CHARGE
INVOICE

No. 9458-6

TRC# 638964

PAGE 1 OF 1

PO# MRF

ORDER: OE0127276Q3527

DATE: 03/27/2018

TIME: 06:36 AM

2-6536

E01/14721

TERMS: NET PAYMENT DUE ON APR. 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
6501-87214	5 GAL	B31W2651	PM 200 0 SG EXTRA Custom: MATCH CCE*Color Cast	5	17.25	86.25N
			OZ 32 64 128			
			B1 Black	-	7	1 -
			N1 Raw Umber	-	15	- -
			Y3 Deep Gold	-	1	- 1
			Custom Manual Match			
			MATCH			
165-0563	EACH	05GLSWB	5 GL BLUE PAIL SW	1	4.75	4.75
			DISCOUNT (% 15.00)			-0.71
598-7821	EACH	9003048	5GAL PAIL LINER	1	4.60	4.60
			DISCOUNT (% 15.00)			-0.69
198-0879	EACH	58405SW	5X5 8OZ CANVAS DROP	1	10.19	10.19
			DISCOUNT (% 15.00)			-1.53
6504-31794	9 INCH	140878200	9 ULTRA FINISH 1/2 2	1	11.19	11.19
			DISCOUNT (% 15.00)			-1.68
105-5490	EACH	01GLSWB	1 GAL SW PLASTIC BUC	1	3.24	3.24
180-1281	EACH	99074299	4-SIDED HD 5GL GRID	1	2.96	2.96
482-8133	2 INCH	PG29..24R	PG29 PREMIUM 48MM	1	4.68	4.68N
180-2628	EACH	10262800	SW 12" FRAME ONLY	1	2.13	2.13
155-3494	EACH	99382800	1GL MINI RLR GRID	1	1.11	1.11
6504-90352	4 INCH		4X3 8" STRIPE MINIRLR	1	4.09	4.09
			DISCOUNT (% 15.00)			-0.61

Thank You
receipt required for refund

SUBTOTAL BEFORE TAX
7.000% SALES TAX: 1-165240500
CHARGE

129.97
2.73
\$132.70

SIGNED PACKING SLIP # 94586 VERIFIES MERCHANDISE WAS RECEIVED IN GOOD ORDER BY:
MIKE

THE SHERWIN WILLIAMS CO.
841 HIGHWAY 6 E
IOWA CITY IA 52240 4404

30B Invoice - Page 61 of 92



SHERWIN-WILLIAMS.

ACCOUNT: 6752-2375-4

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318

(319) 362-2368

* INDICATES SALE PRICE

Visit www.sherwin-williams.com

Store 3783
(319) 338-3604

JOB 72 MRF

SHIPPED TO:

**CHARGE
INVOICE**

No. 0429-4

TRC# 638964
PAGE 1 OF 1
PO# MRF

DATE: 03/28/2018
TIME: 09:27 AM
2-6536
E31/13746

 **RYAN HAJEK**
(319) 362-2368

TERMS: NET PAYMENT DUE ON APR. 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
117-8888	EACH	80328SW	4X15BUTYL ELIMINATOR	1	16.79*	16.79
151-6442	1QT EA	WL05014	SPACKLING PASTE QUAR	1	7.29	7.29N
			DISCOUNT (% 15.00)			-1.09
160-0212	QUART	QTS	LAG THIN 12X1 CSA16	1	8.40	8.40N
160-0238	QUART	QTS	STX DEN ALCOH 12X1 QT	1	7.85	7.85N
Thank You receipt required for refund						
SUBTOTAL BEFORE TAX						39.24
6.000% SALES TAX:1-165224000						1.01
CHARGE						\$40.25

SIGNED PACKING SLIP # 4294 VERIFIES MERCHANDISE WAS RECEIVED IN GOOD ORDER BY:
MIKE

THE SHERWIN WILLIAMS CO.
841 HIGHWAY 6 E
IOWA CITY IA 52240 4404



SHERWIN-WILLIAMS.

ACCOUNT: 6752-2375-4

Visit www.sherwin-williams.com
Store 3783
(319) 338-3604

JOB 72 MRF

**CHARGE
INVOICE**

No. 0434-4

TRC# 638964

PAGE 1 OF 1

PO# MRF

ORDER: OE0277135Q3783

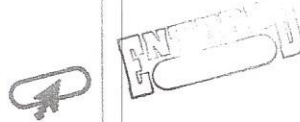
DATE: 03/28/2018

TIME: 10:02 AM

2-6536

E31/13746

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318



(319) 362-2368

TERMS: NET PAYMENT DUE ON APR. 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
6501-87214	5 GAL	B31W2651	PM 200 0 SG EXTRA Custom: MRF OFF WHITE CCE*Color Cast	5	17.25	86.25N
			OZ 32 64 128			
			B1 Black - 7 1 -			
			N1 Raw Umber - 15 - -			
			Y3 Deep Gold - 1 - 1			
			Custom Manual Match OFF WHITE			

Thank You
receipt required for refund

SUBTOTAL BEFORE TAX
6.000% SALES TAX:1-165224000
CHARGE

86.25
0.00
\$86.25

SIGNED PACKING SLIP # 4344 VERIFIES MERCHANDISE WAS RECEIVED IN GOOD ORDER BY:
MIKE

THE SHERWIN WILLIAMS CO.
3501 J ST SW
CEDAR RAPIDS IA 52404



SHERWIN-WILLIAMS.

Visit www.sherwin-williams.com
Store 3527
(319) 364-5036

CHARGE INVOICE

No. 9606-0

TRC# 638964

PAGE 1 OF 1

PO# MRF

ORDER: OE0127402A3527

DATE: 03/30/2018

TIME: 06:20 AM

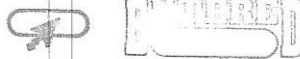
2-6536

E02/14721

ACCOUNT: 6752-2375-4

JOB 72 MRF

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318



(319) 362-2368

TERMS: NET PAYMENT DUE ON APR. 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
6501-87214	5 GAL	B31W2651	PM 200 0 SG EXTRA Custom: MATCH CCE*Color Cast	5	17.25	86.25N
			OZ 32 64 128			
			B1 Black - 7 1 -			
			N1 Raw Umber - 15 - -			
			Y3 Deep Gold - 1 - 1			
			Custom Manual Match			
452-3908	EACH		MATCH 13 POINT SNAP KNIFE	2	1.49	2.98
			DISCOUNT (% 15.00)			-0.45
155-1456	9 INCH	10145690	MFG NBR:66-0455-BULK CS SHPSKIN 9X1/2"	2	10.50	21.00
Thank You receipt required for refund						
SUBTOTAL BEFORE TAX 7.000% SALES TAX:1-165240500 CHARGE						109.78 1.65 \$111.43

SIGNED PACKING SLIP # 96060 VERIFIES MERCHANDISE WAS RECEIVED IN GOOD ORDER BY:
JAMES

THE SHERWIN WILLIAMS CO.
3501 J ST SW
CEDAR RAPIDS IA 52404

30B Invoice - Page 64 of 92



SHERWIN-WILLIAMS

Visit www.sherwin-williams.com
Store 3527
(319) 364-5036

**CHARGE
INVOICE**
No. 1291-0

JOB 01 CORRIDOR PAINT & DRYWALL

PAGE 1 OF 1
PO# MFR
ORDER: OE0129030A3527
DATE: 05/14/2018
TIME: 06:38 AM
2-6536
E01/14688

ACCOUNT: 6752-2375-4

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318

(319) 362-2368

* INDICATES SALE PRICE

TERMS: NET PAYMENT DUE ON JUNE 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
6500-23625	GALLON	B66T654	PI HP AC SG ULTRA Color: SWBRZ6 MEDIUM BRONZE CCE*Color Cast	2	32.60	65.20
			OZ 32 64 128			
			W1 White	-	30	1
			B1 Black	2	46	1
			N1 Raw Umber	4	43	1
			R2 Maroon	-	6	1
			Sher-Color Formula			
			MEDIUM BRONZE			
155-8899	QUART	31901-4	SPACKLING PASTE	1	11.11	11.11
482-8133	2 INCH	PG29..24R	PG29 PREMIUM 48MM	2	4.68	9.36
6509-21802	9 INCH		CS SOFT WOVEN 9X3/16	2	4.39*	8.78
171-5135	9 INCH	105160900	FRAME 9" HD PRO	1	4.99*	4.99
180-1281	EACH	99074299	4-SIDED HD 5GL GRID	1	2.96	2.96
153-5400	EACH	CP-002	CP002 M SNDNG SPNG	1	1.59*	1.59
180-2628	EACH	10262800	SW 12" FRAME ONLY	1	2.13	2.13
6501-66242	4 INCH	994000950	CS VELOUR 4" X 3/16	1	5.09	5.09
155-3494	EACH	99382800	1GL MINI RLR GRID	1	1.11	1.11
165-0563	EACH	05GLSWB	5 GL BLUE PAIL SW	1	4.75	4.75
			DISCOUNT (% 15.00)			-0.71

Thank You
receipt required for refund

SUBTOTAL BEFORE TAX
7.000% SALES TAX:1-165240500
CHARGE

116.36
8.15
\$124.51

SIGNED PACKING SLIP # 12910 VERIFIES MERCHANDISE WAS RECEIVED IN GOOD ORDER BY:
SHANNON

THE SHERWIN WILLIAMS CO.
841 HIGHWAY 6 E
IOWA CITY IA 52240 4404

30B Invoice - Page 65 of 92



SHERWIN-WILLIAMS.

ACCOUNT: 6752-2375-4

Visit www.sherwin-williams.com
Store 3783
(319) 338-3604

JOB 01 CORRIDOR PAINT & DRYWALL

**CHARGE
INVOICE**
No. 2919-2

PAGE 1 OF 1
PO# MRF
ORDER: OE0280229A3783
DATE: 05/18/2018
TIME: 01:20 PM
2-6536
E84/13746

CORRIDOR PAINT & DRYWALL
1639 EDGEWOOD RD SW
CEDAR RAPIDS IA 52404 2318

(319) 362-2368

TERMS: NET PAYMENT DUE ON JUNE 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
6500-23625	GALLON	B66T654	PI HP AC SG ULTRA Color: SWBRZ6 MEDIUM BRONZE CCE*Color Cast	1	32.60	32.60
			OZ 32 64 128			
			W1 White - 30 1 1			
			B1 Black 2 46 1 -			
			N1 Raw Umber 4 43 1 1			
			R2 Maroon - 6 1 -			
			Sher-Color Formula			
165-0563	EACH	05GLSWB	MEDIUM BRONZE 5 GL BLUE PAIL SW	1	4.75	4.75
180-1281	EACH	99074299	DISCOUNT (% 15.00) 4-SIDED HD 5GL GRID	1	2.96	-0.71 2.96
Thank You receipt required for refund						
SUBTOTAL BEFORE TAX						39.60
6.000% SALES TAX:1-165224000						2.38
CHARGE						\$41.98

SIGNED PACKING SLIP # 29192 VERIFIES MERCHANDISE WAS RECEIVED IN GOOD ORDER BY:
SHANNON

Corridor Labor Cost

Corridor Paint & Drywall Inc

1639 Edgewood Rd SW
Cedar Rapids, IA 52404
USA

30B Invoice - Page 67 of 92

INVOICE

Invoice Number: 1698
Invoice Date: May 24, 2018
Page: 1

Duplicate

Voice: 319-362-2368
Fax: 319-362-2369

Bill To:

Woodruff Construction
1890 Kountry Lane
Fort Dodge, IA 50501

Ship to:

Woodruff Construction
1890 Kountry Lane
Fort Dodge, IA 50501

Customer ID	Customer PO	Payment Terms	
WOODRUFF		Net 30 Days	
Sales Rep ID	Shipping Method	Ship Date	Due Date
	Airborne		6/23/18

Quantity	Item	Description	Unit Price	Amount
		MRF Water Damage		
1.00	Hours	1/16/18 Mike Dahm	29.00	29.00
1.50	Hours	1/18/18 Mike Dahm	29.00	43.50
5.00	Hours	1/22/18 Mike Dahm	29.00	145.00
2.50	Hours	1/23/18 Alfredo Rodriguez	29.00	72.50
3.00	Hours	1/24/18 Alfredo Rodriguez	29.00	87.00
2.00	Hours	1/25/18 Alfredo Rodriguez	29.00	58.00
1.50	Hours	1/30/18 Mike Dahm	29.00	43.50
8.00	Hours	1/30/18 Tim Harms	29.00	232.00
8.00	Hours	1/31/18 Tim Harms	29.00	232.00
8.00	Hours	2/1/18 Tim Harms	29.00	232.00
7.00	Hours	2/7/18 Tim Harms	29.00	203.00
8.00	Hours	2/8/18 Tim Harms	29.00	232.00
7.00	Hours	2/9/18 Tim Harms	29.00	203.00
8.00	Hours	3/27/18 James Norton	29.00	232.00
1.00	Hours	3/27/18 Mike Dahm	29.00	29.00
8.00	Hours	3/28/18 James Norton	29.00	232.00
8.00	Hours	3/28/18 Mike Dahm	29.00	232.00
8.00	Hours	3/29/18 Todd Skersick	29.00	232.00
8.00	Hours	3/29/18 James Norton	29.00	232.00
8.00	Hours	3/30/18 James Norton	29.00	232.00

Subtotal	Continued
Sales Tax	Continued
Total Invoice Amount	Continued
Payment/Credit Applied	
TOTAL	Continued

Check/Credit Memo No:

Corridor Paint & Drywall Inc

1639 Edgewood Rd SW
Cedar Rapids, IA 52404
USA

30B Invoice - Page 68 of 92**INVOICE**

Invoice Number: 1698
Invoice Date: May 24, 2018
Page: 2
Duplicate

Voice: 319-362-2368
Fax: 319-362-2369

Bill To:

Woodruff Construction
1890 Kountry Lane
Fort Dodge, IA 50501

Ship to:

Woodruff Construction
1890 Kountry Lane
Fort Dodge, IA 50501

Customer ID	Customer PO	Payment Terms	
WOODRUFF		Net 30 Days	
Sales Rep ID	Shipping Method	Ship Date	Due Date
	Airborne		6/23/18

Quantity	Item	Description	Unit Price	Amount
8.00	Hours	3/30/18 Todd Skersick	29.00	232.00
2.00	Hours	4/3/18 James Norton	29.00	58.00
3.00	Hours	4/4/18 James Norton	29.00	87.00
8.00	Hours	5/14/18 Shannon Kelchner	29.00	232.00
8.00	Hours	5/15/18 Shannon Kelchner	29.00	232.00
8.00	Hours	5/16/18 Shannon Kelchner	29.00	232.00
8.00	Hours	5/17/18 Shannon Kelchner	29.00	232.00
1.50	Hours	5/18/18 Shannon Kelchner	29.00	43.50

Subtotal	4,582.00
Sales Tax	
Total Invoice Amount	4,582.00
Payment/Credit Applied	
TOTAL	4,582.00

Check/Credit Memo No:

TIME AND MATERIAL FORM

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

TIME AND MATERIAL FORM

General Contractor WOODRUFF CONST. CO.

Date Work Performed 1/18/18

Subcontractor CORRIDOR PAINT & DRYWALL

Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR


Project Number #0744901

Description of Work walk Plaster Repair and Grout material

Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.
Mike Dahn	Painter		1.5	

[illegible]

Subcontractor's Representative (if applicable) THA R

General Contractor's Representative 

Owner's Representative (Required) *David [Signature]* *1/13/18*

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

TIME AND MATERIAL FORM

Description of Work review paper work and work on pricing

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722



TIME AND MATERIAL FORM

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

TIME AND MATERIAL FORM

Project Name	
Description of Work	RE-ASTER WALL ON 2ND FL.

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

TIME AND MATERIAL FORM

General Contractor WOODRUFF CONST. CO.

Date Work Performed 1/25/18

Subcontractor CORRIDOR PAINT & DRYWALL

Change Order Request No _____

Project Name MLF WATER DAMAGE REPAIR

Project Number # 0744901

Description of Work REPLASTER WALL ON 2ND FL.

Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.
RODRIGUEZ RAYWALL			2	0

[illegible]

Subcontractor's Representative (if applicable)

General Contractor's Representative.

Owner's Representative (Required)

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO.

Date Work Performed 1/30/18

Subcontractor CORRIDOR PAINT & DRYWALL

Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work pickup and deliv materials, match glass

Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.
Mike Dahm	Boat		1.5	

Equipment and Material (attach invoices)

[illegible]

Subcontractor's Representative (if applicable)

General Contractor's Representative

Owner's Representative (Required)

White=Contractor Copy
Yellow=Owner Copy
April, 2007

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO.Date Work Performed 1/30/18Subcontractor CORRIDOR PAINT & DRY WALL

Change Order Request No. _____

Project Name MUR WATER DAMAGE REPAIRProject Number # 0744901Description of Work PAINTING 2ND FL AROUND REPLASTERED AREA
& 5TH FLR. PATCHES

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
HARM S	PAINT		8	0					

Equipment and Material (attach invoices)

Quantity	Description
*2	Gallons Pro Mar 200 Eg Shel
2	PG 29 1 1/2" tape

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 1/31/18
 Subcontractor CORRIDOR PAINT & DRYWALL Change Order Request No. _____
 Project Name MRF WATER DAMAGE REPAIR Project Number #0744901
 Description of Work TIM HARMS / PAINT DRYWALL FIXES ON 5TH FL.
AND LOBBY ON 3RD

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
HARMS	PAINT		8	0					

Equipment and Material (attach invoices)

Quantity	Description
5	Gallons ProMar 200 E, Shel
2	PG-29 1 1/2" tape

Subcontractor's Representative (if applicable) Tim Harms

General Contractor's Representative [Signature]

Owner's Representative (Required) [Signature]

**TIME AND MATERIAL FORM**

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/1/18
Subcontractor CORRIDOR PAINT & DRYWALL Change Order Request No. _____
Project Name MRF WATER DAMAGE REPAIR Project Number #0744901
Description of Work TIM HALMS / PAINT DOORFRAME ON 2ND
& ELEVATOR LOBBY ON 2ND

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
					HALMS			8	0

Equipment and Material (attach invoices)

Quantity	Description
1	Quart ProClassic Semi-Gloss

Subcontractor's Representative (if applicable) General Contractor's Representative Owner's Representative (Required) 



FACILITIES MANAGEMENT
Design & Construction**TIME AND MATERIAL FORM**

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 2/3/18Subcontractor CORRIDOR PAINT+DRYWALL Change Order Request No _____Project Name MRF WATER DAMAGE REPAIR Project Number #0744901Description of Work HALMS / PAINT DRYWALL FIXES ON 4TH
+ CORRIDOR ON 4TH FL.

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
HALMS	PAINT		8	0					

Equipment and Material (attach invoices)

Quantity	Description

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy

Yellow=Owner Copy

April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722



USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

Description of Work HALMS / DRYWALL FIXES 4TH & 3RD

Equipment and Material (attach invoices)

Owner's Representative (Required) daniel (unclear)

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO.Date Work Performed 3/27/18Subcontractor CORRIDOR PAINT & DRYWALL

Change Order Request No _____

Project Name MRF WATER DAMAGE REPAIRProject Number #0744901Description of Work JAMES NORTON / PAINTING IN STAIRWELLMike Dahm / Delivered & set up

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
					Norton			8	0
					Dahm			1	0

Equipment and Material (attach invoices)

Quantity	Description
	SHERWIN WILLIAMS RECEIPT (PAINT & SUPPLIES)
	RECEIPT # 9458-6

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722



FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO.

Date Work Performed 3/28/18

Subcontractor CORRIDOR PAINT+DRYWALL

Change Order Request No

Project Name MRF WATER DAMAGE REPAIR

Project Number #0744901

Description of Work PAINTING STAIRWELL

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
					<u>Lorton</u>			<u>8</u>	<u>0</u>
					<u>SKERSICK</u>			<u>8</u>	<u>0</u>

Equipment and Material (attach invoices)

Quantity	Description
<u>2</u>	<u>SHERWIN WILLIAMS RECEIPTS (PAINT+SUPPLIES)</u>
	<u># 0429-4</u>
	<u>0434-4</u>

Subcontractor's Representative (if applicable)

General Contractor's Representative

Owner's Representative (Required)

White=Contractor Copy
Yellow=Owner Copy
April, 2007

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

TIME AND MATERIAL FORM

Description of Work	PAINTING STAIRWELL / NORTON, SKEESICK		
---------------------	---------------------------------------	--	--

[illegible][illegible]

Owner's Representative (Required) Samuel K. [Signature]

W27323/4-17



FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO.

Date Work Performed 3/30/18

Subcontractor CORRIDOR P&D

Change Order Request No. _____

Project Name MRF WATER DAMAGE REPAIR

Project Number #0744901

Description of Work PAINTING STAIRWELL / SKERSICK, NORTON

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
					NOLTON			8	0
					SKERSICK			8	0

Equipment and Material (attach invoices)

Quantity	Description
	SHELDON WILLIAMS RECEIPT # 9606-0

Subcontractor's Representative (if applicable) _____

General Contractor's Representative _____

Owner's Representative (Required) _____

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W27323/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722



TIME AND MATERIAL FORM

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722



TIME AND MATERIAL FORM

General Contractor WOODRUFF CONST. CO. Date Work Performed 4/4

Subcontractor CORRIDOR PAINT + DRYWALL Change Order Request No. _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work FINISH UP STAIRWELL / NOLTON

Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.
NOLTON			3	

Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.

Equipment and Material (attach invoices)

[illegible]

Subcontractor's Representative (if applicable) *[Signature]*

General Contractor's Representative _____

Owner's Representative (Required) *David [Signature]*

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO.Date Work Performed 5/14/18Subcontractor CORRIDOR P+W

Change Order Request No. _____

Project Name MRF WATER DAMAGE REPAIRProject Number #0744901Description of Work Finish painting doors & frames & prep

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
Shannon Ketchum	painter	21.00	8	0					

Equipment and Material (attach invoices)

Quantity	Description
men	prep first - third Floor & painted first coat
men	Bought Tape 2 Rolls 2 roller covers 2 sanding blocks 1 roller foam & Grit

Subcontractor's Representative (if applicable) Shannon KetchumGeneral Contractor's Representative [Signature]Owner's Representative (Required) [Signature]White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722



Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO.

Date Work Performed 5/15/18

Subcontractor CORRIDOR P+W

Change Order Request No

Project Name MUF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Finish painting 1st - 5th Floor elevator doors + frame

Name	Trade	Hourly Rate	Hours			Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.					Reg.	O.T.
Shannon Kelen	painter	21.00	4	0						

Equipment and Material (attach invoices)

Quantity	Description
1 ac	Finish painting 3, 5 and prep 3, 5 floor

Subcontractor's Representative (if applicable) Shannon Kelen

General Contractor's Representative [Signature]

Owner's Representative (Required) [Signature]

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722



Facilities Management
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/16/18

Subcontractor CORRIDOR P&D Change Order Request No. _____

Project Name MRF WATER DAMAGE REPAIR Project Number #0744901

Description of Work Finish paint doors & frames 4th - 5th

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
<u>Shannon Nelson</u>	<u>painter</u>	<u>21.00</u>	<u>8</u>	<u>0</u>					

Equipment and Material (attach invoices)

Quantity	Description
	<u>prep 5th floor & finished coated 4th & unmasked 3,4</u>

Subcontractor's Representative (if applicable) Shannon Nelson

General Contractor's Representative [Signature]

Owner's Representative (Required) [Signature]

White=Contractor Copy
Yellow=Owner Copy
April, 2007

W31818/3-18

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

FACILITIES MANAGEMENT
Design & Construction

TIME AND MATERIAL FORM

USE ONE FORM FOR EACH DAY - MUST BE LEGIBLE

General Contractor WOODRUFF CONST. CO. Date Work Performed 5/17
Subcontractor CORRIDOR PAINT+DRYWALL Change Order Request No _____
Project Name MRF WATER DAMAGE REPAIR Project Number #0744901
Description of Work Finish painting 4th + 5th elevator doors + frames

Name	Trade	Hourly Rate	Hours		Name	Trade	Hourly Rate	Hours	
			Reg.	O.T.				Reg.	O.T.
Shawn Ketchum	painter	21.00	8	0					

Equipment and Material (attach invoices)

Quantity	Description
	finished 5 elevator doors + frames + prep and unmasked and cleaned up area

Subcontractor's Representative (if applicable)

General Contractor's Representative

Owner's Representative (Required)

White=Contractor Copy

Yellow=Owner Copy

April, 2007

W27923/4-17

200 University Services Building
Iowa City, Iowa 52242
319-335-5500 Fax 319-335-2722

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Payment details for voucher: 82947851

Voucher ID	Vendor ID	Remit LOC	Vendor Name	Gross Voucher Amt.	Payment Handling Code
82947851	0000515030	002	Woodruff Construction LLC	\$57,892.19	AC

Payment Status	Payment Information	Invoice #	Invoice Date	Remit to	Amt From Voucher
PAID	ACH: 583679 Dt: 06/25/2018 Amt: \$57,892.19	0744901-005	06/14/2018	Detail	\$57,892.19

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