

MEMBERS OF COUNCIL

HON. KIM REYNOLDS
GOVERNOR

HON. PAUL D. PATE
SECRETARY OF STATE

HON. ROB SAND
AUDITOR OF STATE

HON. ROBY SMITH
TREASURER OF STATE

HON. MIKE. NAIG
SECRETARY OF AGRICULTURE



Executive Council of Iowa

CAPITOL BUILDING
DES MOINES, IOWA 50319
PHONE: 515 281-5368
FAX: 515 281-7562

May 6, 2024

Accounting Department
Office of the Treasurer
Lucas Building
321 E 12th Street
Des Moines, IA, 50319

The Executive Council, in a meeting held on this date, approved payment of the following cost item:

Board of Regents - University of Northern Iowa.....\$727,051.61
On December 15, 2021, a wind storm caused damages to the roof of the Nielsen Fieldhouse and Wellness and Recreation Center. Request was to cover repair costs.

This represents full and final payment.

EXECUTIVE COUNCIL OF IOWA

Kristi Onstot
Acting Executive Secretary

cc: Sarah Harms, University of Northern Iowa
John Nash, Director of Facilities, Board of Regents
Andrea Anania, Board of Regents
Aimee Claeys, Board of Regents
Matt Bender, Department of Management
Heather Hackbarth, Department of Management

AOS Claim # 2249
TOS Job # 22BF



OFFICE OF AUDITOR OF STATE
STATE OF IOWA

Rob Sand
Auditor of State

State Capitol Building
Des Moines, Iowa 50319-0004
Telephone (515) 281-5834 Facsimile (515) 281-6518

April 10, 2024

Victoria Newton
Executive Council
L O C A L

Subject: Damages to Roofs of Nielsen Fieldhouse and Wellness Recreation Center due to
Wind Storm on December 15, 2021
University of Northern Iowa – Board of Regents
Claim dated March 1, 2022
AOS Claim ID: 2249

In accordance with Executive Council policy, we have examined the invoices and supporting documentation for final payment related to the damages and have found the items to be in order as shown below:

Documented request		\$	<u>727,051.61</u>
Executive Council Allocation		\$	1,005,153.40
Less:			
Previous payments	\$	278,101.79	
This payment		<u>727,051.61</u>	
Total		\$	<u>1,005,153.40</u>
Remaining Executive Council allocation		\$	<u>0.00</u>

We recommend reimbursement be made in the amount of \$727,051.61. This represents full and final payment on this allocation.

Sincerely,

Brian R. Brustkern, CPA
Deputy Auditor of State

cc: Sarah Harms, Assistant to Senior Vice President for Finance & Operations, University
of Northern Iowa
John Nash, Director of Facilities, Board of Regents



March 1, 2024

John Nash
Board of Regents, State of Iowa
11260 Aurora Avenue
Urbandale, IA 50322-7905

Dear John,

On March 1, 2022 the University of Northern Iowa submitted a preliminary report on the damage incurred by a wind storm that impacted campus on December 15, 2021.

The preliminary estimate as noted in the March 1, 2022 letter was \$1,005,153.40. In accordance with the Code of Iowa section 29C.20, the University received approval from the Executive Council for an emergency allocation of \$1,005,153.40, subject to audit of actual invoices. The AOS Claim ID is 2249.

A final report was submitted on February 9, 2023 for completed work to McLeod Center and Nielsen Fieldhouse for \$278,101.79 leaving a balance of \$727,051.61. At this time, all of the work has been completed. We are submitting the second installment for repairs to Wellness Recreation Center. The final cost exceeds the balance of the allocation by a minimal amount. We are requesting the remaining balance of \$727,051.61. Enclosed are various invoices and proof of payment.

Sincerely,

Dr. Michael Hager
Senior Vice President for Finance & Operations

Summary of Costs

Description	Estimate	Actual / Requested
Wellness Recreation Center		
Advanced Environmental: Rm 274	\$2,800.00	\$ 2,800.00
Black Hawk Roof: Roof 3f	31,148.00	31,148.00
ISG (Consultant Estimate)	470,830.00	
I&S Group		66,200.00
Facilities Management Design Fees		762.34
Black Hawk Roof Co.		626,167.18
TOTAL	\$502,808.00	\$727,077.50

Emergency Allocation Summary – AOS Claim ID 2249:

\$1,005,153.40	Approved Allocation 4/4/2022
(\$ 278,101.79)	Installment #1 paid 4/3/2023
<u>(\$ 727,051.61)</u>	Installment #2 requested 3/1/23
0	Balance



803 Ricker St Waterloo, IA 50703 319-287-4447

Invoice

Date	Invoice #
2/1/2022	9194

Bill To
University of Northern Iowa Facilities Planning 2601 Campus Street Cedar Falls, IA 50614-0530

Work Completed
Clean Up Debris Wellness Rec Center 2301 Hudson Road Cedar Falls, IA

P.O. No.	Terms	Project	Contact Person
	Net 30	22-26891	Amy Selzer

Description	Qty	Rate	Amount
Cleanup of insulation & debris at the UNI WRC Rm 274	1	2,800.00	2,800.00
NOTICE: Please pay from this invoice-Thanks		0.00	0.00

Total	\$2,800.00
Balance Due	\$2,800.00

Ok to pay
AKS

23653

proof of payment

Invoice Overview (UNI Purchasing User)

Trading Partner	Advanced Envrntl Testing & Abatement I	Site	WATERLOO		
Supplier Num	39473	Operating Unit	University of Northern I		
Invoice Num	9194	Type	Standard	Date	01-FEB-2022
Batch Name	eac020922a	Currency	USD	Amount	2800.00
Voucher	634487	Release		Unpaid	0.00
PO Number	133503	Unapplied		Settlement Date	
Receipt Num		Description	Clean Up Debris WRC		

Invoice Status

Approval	Not Required
Status	Validated
Accounting	Processed
Payment	Fully Paid

Active Hold	Reason
<input checked="" type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

Scheduled Payments

Curr	Amount	Remaining	Due Date	Held	Paid By	Paid On
<input checked="" type="checkbox"/> USD	2800.00	0.00	03-MAR-2022	<input type="checkbox"/>	306406 - Electron	02-MAR-2022
<input type="checkbox"/>				<input type="checkbox"/>		
<input type="checkbox"/>				<input type="checkbox"/>		

Actual Payments

Paid By	Paid On
306406 - Electron	02-MAR-2022

Payment Overview View Receipt Supplier Invoice Workbench



Black Hawk Roof Co Inc

619 E. 19th St
 Cedar Falls, IA 50613
 Phone: (319) 277-9355
 Fax: (319) 277-9360
 PO133072
 1/6/2022
 4646
 ID23658
 31148.00

Invoice

Invoice Number	4646
Invoice Date	12/30/2021

paid 1/18/2022
 F360
 Receipt - 270928

Bill To: University of Northern Iowa
 Accounts Payable
 GIL 103 0008
 Cedar Falls, IA 50614

Re: Time and Material

Job No	Customer Job No	Customer PO	Payment Terms	Due Date
2			Net 30 Days	1/29/2022
Quantity	Description	U/M	Rate/Unit	Price
	12/16/21, 12/17/21, and 12/20/21 WRC			
	WO 23658		31,148.00	31,148.00
	Labor 214 hrs x \$58.00/hr = \$12,412.00			
	Material = \$18,736.00			

Subtotal	\$	31,148.00
Sales Tax (if applicable)	\$	0.00
Total Due	\$	31,148.00

Thank you for your business!

proof of payment

Invoice Overview (UNI Purchasing User)

Trading Partner	Black Hawk Roof Co Inc	Site	Cedar Falls			
Supplier Num	11651	Operating Unit	University of Northern I			
Invoice Num	4646	Type	Standard			
Batch Name	eac012022a	Currency	USD			
Voucher	634005	Date	30-DEC-2021			
P.O. Number	133072	Amount	31148.00			
Receipt Num		Unpaid	0.00			
		Release				
		Unapplied				
		Settlement Date				
Invoice Status	Description 12/16-20/21 WRC Roof 3 Repairs					
Approval	Not Required	Active Hold	Reason			
Status	Validated	<input checked="" type="checkbox"/>				
Accounting	Processed	<input type="checkbox"/>				
Payment	Fully Paid	<input type="checkbox"/>				
Scheduled Payments		Actual Payments				
Curr	Amount	Remaining	Due Date	Held	Paid By	Paid On
<input checked="" type="checkbox"/> USD	31148.00	0.00	30-DEC-2021	<input type="checkbox"/>	302025 - Electror	20-JAN-2022
				<input type="checkbox"/>		
				<input type="checkbox"/>		

Payment Overview View Receipt Supplier Invoice Workbench



I & S Group, Inc.
 115 E. Hickory St. Suite 300
 Mankato, MN 56001
 507-387-6651
 www.ISGInc.com

University of Northern Iowa
 Facilities Management
 1801 W. 31st Street
 Cedar Falls, IA 50614-0530

Invoice Number 79696
 Date 02/28/2022

**Project 22-26304 UNI Wellness
 Center Roof Replacement - Cedar
 Falls, IA**

Progress billing for professional services provided through date of invoice

Description	Contract Amount	Prior Billed	Current Billed
Construction Documents	\$36,000.00		\$15,000.00
Bidding and Negotiation	\$2,400.00		
Construction Administration	\$4,800.00		
Records Documents	\$4,800.00		
Reimbursables			
	\$48,000.00		\$15,000.00

Invoice Amount \$15,000.00

*Payment Terms: Net 30 days from invoice date. Thank you.
 Past due balances are subject to late fees in the amount of 1.5% per month.
 If you have a question regarding your invoice, please e-mail ar@ISGInc.com*

*ok to pay
 ASD*

UNIVERSITY OF NORTHERN IOWA

FACILITIES MANAGEMENT - CEDAR FALLS, IA 50614-0530 -- PHONE 319-273-2611

INSTRUCTIONS

1. IF INVOICE CHARGES ARE ACCEPTED AND APPROVED, SIGN AND FORWARD.
2. IF INVOICE CHARGES ARE NOT ACCEPTABLE, RETURN VOUCHER WITH WRITTEN COMMENTS.

VOUCHER DATE:	4/13/2022	VENDOR'S INVOICE NO.	79696	UNI BLANKET P.O. 134221
DEPARTMENT		Facilities Management		INVOICE DATE
				2/28/2022
VENDOR NAME AND ADDRESS	I & S Group, Inc. 115 E. Hickory St., Suite 300 Mankato, MN 56001		SUPPLIER NUMBER	
			83599	

VOUCHER

QUANTITY SHIPPED	DESCRIPTION	UNIT PRICE	AMOUNT CHARGED
	Wellness Recreation Center Roof Replacement Phase 1		
	Maximum Contract Amount	\$48,000.00	
	Amendment No. 1	\$17,000.00	
	Basic Services Maximum	\$ 65,000.00	
	Date of Service: Through 02/28/2022		
	Paid to Date	\$ -	
	This Payment (VOU007703)	\$ 15,000.00	\$ 15,000.00
		\$ 15,000.00	
	Balance Remaining	\$ 50,000.00	
	Reimbursable Expenses		
	Paid to Date	\$ -	
	This Payment	\$ -	\$ -
		\$ -	
	Balance Remaining	\$ -	

DOES THIS VOUCHER COMPLETE THIS ORDER? **TOTAL** \$ 15,000.00

ACCOUNT	EXPENSE TYPE	NUMBER	AMOUNT	APPROVAL INITIALS
0204.00.00000.12720.0000.00.0000.000	Physical Plant	W22586700	\$ 15,000.00	

If additional lines are needed, please attach a separate sheet.

Prepared by Zach Baethke

APPROVED FOR PAYMENT 04/13/2022

DATE

DocuSigned by:

Amy Selzer
signature:97CA0B2ED09438...

APPROVED FOR PAYMENT

APPROVED FOR PAYMENT 04/13/2022

DATE

DocuSigned by:

Jose Luis San Miguel
signature:9F80C9CDD064F8...

proof of payment

Invoice Overview (UNI Purchasing User)

Trading Partner	& S Group Inc	Site	MANKATO		
Supplier Num	83599	Operating Unit	University of Northern I		
Invoice Num	79696	Type	Standard	Date	28-FEB-2022
Batch Name	eac041422a	Currency	USD	Amount	15000.00
Voucher	636431	Release	1	Unpaid	0.00
PO Number	134221	Unapplied		Settlement Date	
Receipt Num		Description	01/07/22-02/28/22 Wellness Recreation (

Invoice Status

Approval	Not Required
Status	Validated
Accounting	Processed
Payment	Fully Paid

Scheduled Payments				Actual Payments		
Curr	Amount	Remaining	Due Date	Held	Paid By	Paid On
<input checked="" type="checkbox"/> USD	15000.00	0.00	28-FEB-2022	<input type="checkbox"/>	308101 - Electror	14-APR-2022
<input type="checkbox"/>				<input type="checkbox"/>		
<input type="checkbox"/>				<input type="checkbox"/>		

Payment OverviewView ReceiptSupplierInvoice Workbench



I & S Group, Inc.
 115 E. Hickory St.
 Suite 300
 Mankato, MN 56001
 507-387-6651
 www.ISGInc.com

University of Northern Iowa
 Facilities Management
 1801 W. 31st Street
 Cedar Falls, IA 50614-0530

Invoice Number 80301
 Date 03/31/2022

**Project 22-26304 UNI Wellness
 Center Roof Replacement - Cedar
 Falls, IA**

Progress billing for professional services provided through date of invoice

Description	Contract Amount	Prior Billed	Current Billed
Construction Documents	\$36,000.00	\$15,000.00	\$1,000.00
Bidding and Negotiation	\$2,400.00		
Construction Administration	\$4,800.00		
Records Documents	\$4,800.00		
Addl Investigation/Diagnostic	\$17,000.00		\$17,000.00
Reimbursables			
	\$65,000.00	\$15,000.00	\$18,000.00

Invoice Amount \$18,000.00

*Payment Terms: Net 30 days from invoice date. Thank you.
 Past due balances are subject to late fees in the amount of 1.5% per month.
 If you have a question regarding your invoice, please e-mail ar@ISGInc.com*

*ok to pay
 AED*

Aging Summary

Invoice Number	Invoice Date	0 - 30	31 - 60	61-90	Over 90	Balance
79696	2/28/2022	\$0.00	\$15,000.00	\$0.00	\$0.00	\$15,000.00
80301	3/31/2022	\$18,000.00				\$18,000.00
Total Outstanding		\$18,000.00	\$15,000.00	\$0.00	\$0.00	\$33,000.00

UNIVERSITY OF NORTHERN IOWA

FACILITIES MANAGEMENT - CEDAR FALLS, IA 50614-0530 -- PHONE 319-273-2611

INSTRUCTIONS

1. IF INVOICE CHARGES ARE ACCEPTED AND APPROVED, SIGN AND FORWARD.
2. IF INVOICE CHARGES ARE NOT ACCEPTABLE, RETURN VOUCHER WITH WRITTEN COMMENTS.

VOUCHER DATE:	4/18/2022	VENDOR'S INVOICE NO.	80301	UNI BLANKET P.O. 134221
DEPARTMENT		Facilities Management		INVOICE DATE
				3/31/2022
VENDOR NAME AND ADDRESS	I & S Group, Inc. 115 E. Hickory St., Suite 300 Mankato, MN 56001		SUPPLIER NUMBER	
			83599	

VOUCHER

QUANTITY SHIPPED	DESCRIPTION	UNIT PRICE	AMOUNT CHARGED
	Wellness Recreation Center Roof Replacement Phase 1		
	Maximum Contract Amount	\$48,000.00	
	Amendment No. 1	\$17,000.00	
	Basic Services Maximum	\$ 65,000.00	
	Date of Service: 3/1/22 - 3/31/22		
	Paid to Date	\$ 15,000.00	
	This Payment (VOU007739)	\$ 18,000.00	
		\$ 33,000.00	\$ 18,000.00
	Balance Remaining	\$ 32,000.00	
	Reimbursable Expenses		
	Paid to Date	\$ -	
	This Payment	\$ -	
		\$ -	\$ -
	Balance Remaining	\$ -	

DOES THIS VOUCHER COMPLETE THIS ORDER?	TOTAL	\$ 18,000.00
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ACCOUNT	EXPENSE TYPE	NUMBER	AMOUNT	APPROVAL INITIALS
0204.00.00000.12720.0000.00.0000.000	Physical Plant	W22586700	\$ 18,000.00	

If additional lines are needed, please attach a separate sheet.

Prepared by Zach Baethke

APPROVED FOR PAYMENT 04/18/2022

DATE

DocuSigned by:

Amy Selzer

signature197CA062ED08438...

APPROVED FOR PAYMENT

APPROVED FOR PAYMENT 04/18/2022

DATE

DocuSigned by:

Jose Luis San Miguel

signature9FB0CACDD084F8...

proof of payment

Invoice Overview (UNI Purchasing User)

Trading Partner	& S Group Inc	Site	MANKATO
Supplier Num	83599	Operating Unit	University of Northern I
Invoice Num	80301	Type	Standard
Batch Name	ymb041922a	Currency	USD
Voucher	636560	Amount	18000.00
PO Number	134221	Unpaid	0.00
Receipt Num		Release	2
		Unapplied	
		Settlement Date	

Invoice Status

Approval	Not Required
Status	Validated
Accounting	Processed
Payment	Fully Paid

Description: 3/1-31/22 Nielsen Field House Roof Repl

Active Hold	Reason
<input checked="" type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

Scheduled Payments

Curr	Amount	Remaining	Due Date
<input checked="" type="checkbox"/> USD	18000.00	0.00	31-MAR-2022
<input type="checkbox"/>			
<input type="checkbox"/>			

Actual Payments

Paid By	Paid On
<input type="checkbox"/> 308266 - Electror	20-APR-2022
<input type="checkbox"/>	
<input type="checkbox"/>	

Payment Overview View Receipt Supplier Invoice Workbench



I & S Group, Inc.
 115 E. Hickory St.
 Suite 300
 Mankato, MN 56001
 507-387-6651
 www.ISGInc.com

University of Northern Iowa
 Facilities Management
 1801 W. 31st Street
 Cedar Falls, IA 50614-0530

Invoice Number 81771
 Date 04/30/2022

**Project 22-26304 UNI Wellness
 Center Roof Replacement - Cedar
 Falls, IA**

Progress billing for professional services provided through date of invoice

Progress Invoice through 4/30/22

Description	Contract Amount	Prior Billed	Current Billed
Construction Documents	\$36,000.00	\$16,000.00	\$10,000.00
Bidding and Negotiation	\$2,400.00		
Construction Administration	\$4,800.00		
Records Documents	\$4,800.00		
Addl Investigation/Diagnostic	\$17,000.00	\$17,000.00	
Reimbursables			
	\$65,000.00	\$33,000.00	\$10,000.00

Invoice Amount \$10,000.00

*Payment Terms: Net 30 days from invoice date. Thank you.
 Past due balances are subject to late fees in the amount of 1.5% per month.*

If you have a question regarding your invoice, please e-mail ar@ISGInc.com

*ok to pay
 WLS*

UNIVERSITY OF NORTHERN IOWA

FACILITIES MANAGEMENT - CEDAR FALLS, IA 50614-0530 -- PHONE 319-273-2611

INSTRUCTIONS

1. IF INVOICE CHARGES ARE ACCEPTED AND APPROVED, SIGN AND FORWARD.
2. IF INVOICE CHARGES ARE NOT ACCEPTABLE, RETURN VOUCHER WITH WRITTEN COMMENTS.

VOUCHER DATE:	5/17/2022	VENDOR'S INVOICE NO.	81771	UNI BLANKET P.O. 134221
DEPARTMENT		Facilities Management		INVOICE DATE
				4/30/2022
VENDOR NAME AND ADDRESS	I & S Group, Inc. 115 E. Hickory St., Suite 300 Mankato, MN 56001		SUPPLIER NUMBER	
			83599	

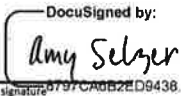
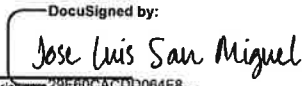
VOUCHER

QUANTITY SHIPPED	DESCRIPTION	UNIT PRICE	AMOUNT CHARGED
	Wellness Recreation Center Roof Replacement Phase 1		
	Maximum Contract Amount	\$48,000.00	
	Amendment No. 1	\$17,000.00	
	Basic Services Maximum	\$ 65,000.00	
	Date of Service: 4/1/22 - 4/30/22		
	Paid to Date	\$ 33,000.00	
	This Payment (VOU007791)	\$ 10,000.00	\$ 10,000.00
		\$ 43,000.00	
	Balance Remaining	\$ 22,000.00	
	Reimbursable Expenses		
	Paid to Date	\$ -	
	This Payment	\$ -	\$ -
		\$ -	
	Balance Remaining	\$ -	

DOES THIS VOUCHER COMPLETE THIS ORDER? **TOTAL** \$ 10,000.00

ACCOUNT	EXPENSE TYPE	NUMBER	AMOUNT	APPROVAL INITIALS
0204.00.00000.12720.0000.00.0000.000	Physical Plant	W22586700	\$ 10,000.00	

If additional lines are needed, please attach a separate sheet.

Prepared by Zach Baethke APPROVED FOR PAYMENT 05/17/2022 <small>DATE</small>	DocuSigned by:  <small>signature: 0797CA0B2ED9438...</small>	APPROVED FOR PAYMENT <div style="border: 1px solid black; height: 60px; width: 100%;"></div>
APPROVED FOR PAYMENT 05/20/2022 <small>DATE</small>	DocuSigned by:  <small>signature: 29F60CACDD064F8...</small>	

proof of payment

Invoice Overview (UNI Purchasing User)

Trading Partner	I & S Group Inc	Site	MANKATO		
Supplier Num	83599	Operating Unit	University of Northern I		
Invoice Num	81771	Type	Standard	Date	30-APR-2022
Batch Name	ymb052522a	Currency	USD	Amount	10000.00
Voucher	637575	Release	3	Unpaid	0.00
PO Number	134221	Unapplied		Settlement Date	
Receipt Num					

Invoice Status

Approval	Not Required
Status	Validated
Accounting	Processed
Payment	Fully Paid

Description: Wellness Recreation Center Roof Replac

Active Hold	Reason
<input checked="" type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

Scheduled Payments

Curr	Amount	Remaining	Due Date
<input checked="" type="checkbox"/> USD	10000.00	0.00	30-APR-2022
<input type="checkbox"/>			
<input type="checkbox"/>			

Actual Payments

Held	Paid By	Paid On
<input type="checkbox"/>	309905 - Electror	25-MAY-2022
<input type="checkbox"/>		
<input type="checkbox"/>		

Payment Overview View Receipt Supplier Invoice Workbench



I & S Group, Inc.
 115 E. Hickory St.
 Suite 300
 Mankato, MN 56001
 507-387-6651
 www.ISGInc.com

University of Northern Iowa
 Facilities Management
 1801 W. 31st Street
 Cedar Falls, IA 50614-0530

Invoice Number 82073
 Date 05/31/2022

**Project 22-26304 UNI Wellness
 Center Roof Replacement - Cedar
 Falls, IA**

Progress billing for professional services provided through date of invoice

Progress Invoice through 5/31/22

Description	Contract Amount	Prior Billed	Current Billed
Construction Documents	\$36,000.00	\$26,000.00	\$10,000.00
Bidding and Negotiation	\$2,400.00		\$1,000.00
Construction Administration	\$4,800.00		
Records Documents	\$4,800.00		
Addl Investigation/Diagnostic	\$17,000.00	\$17,000.00	
Reimbursables			
	\$65,000.00	\$43,000.00	\$11,000.00

Invoice Amount \$11,000.00

Payment Terms: Net 30 days from invoice date. Past due balances are subject to late fees in the amount of 1.5% per month. If you have a question regarding your invoice or are interested in receiving invoices electronically, please e-mail AR@ISGInc.com

Automated Clearing House (ACH) Instructions

Account Name: I&S Group, Inc.
 ABA/Routing Number: 073000642
 Account Number: 2348642289
 Send Remittance to: AR@ISGinc.com

*date pay
 as is*

UNIVERSITY OF NORTHERN IOWA

FACILITIES MANAGEMENT - CEDAR FALLS, IA 50614-0530 -- PHONE 319-273-2611

INSTRUCTIONS

1. IF INVOICE CHARGES ARE ACCEPTED AND APPROVED, SIGN AND FORWARD.
2. IF INVOICE CHARGES ARE NOT ACCEPTABLE, RETURN VOUCHER WITH WRITTEN COMMENTS.

VOUCHER DATE:	6/8/2022	VENDOR'S INVOICE NO.	82073	UNI BLANKET P.O. 134221
DEPARTMENT		Facilities Management		INVOICE DATE
				5/31/2022
VENDOR NAME AND ADDRESS	I & S Group, Inc. 115 E. Hickory St., Suite 300 Mankato, MN 56001		SUPPLIER NUMBER	
			83599	

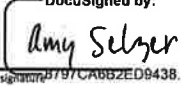
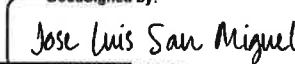
VOUCHER

QUANTITY SHIPPED	DESCRIPTION	UNIT PRICE	AMOUNT CHARGED
	Wellness Recreation Center Roof Replacement Phase 1		
	Maximum Contract Amount	\$48,000.00	
	Amendment No. 1	\$17,000.00	
	Basic Services Maximum	\$ 65,000.00	
	Date of Service: 5/1/22 - 5/31/22		
	Paid to Date	\$ 43,000.00	
	This Payment (VOU007810)	\$ 11,000.00	\$ 11,000.00
		\$ 54,000.00	
	Balance Remaining	\$ 11,000.00	
	Reimbursable Expenses		
	Paid to Date	\$ -	
	This Payment	\$ -	\$ -
		\$ -	
	Balance Remaining	\$ -	

DOES THIS VOUCHER COMPLETE THIS ORDER?	TOTAL	\$ 11,000.00
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ACCOUNT	EXPENSE TYPE	NUMBER	AMOUNT	APPROVAL INITIALS
0204.00.00000.12720.0000.00.0000.000	Physical Plant	W22586700	\$ 11,000.00	

If additional lines are needed, please attach a separate sheet. **Total**

Prepared by Laura Moody APPROVED FOR PAYMENT DATE: 06/08/2022	DocuSigned by:  <small>signature:8797CABB2ED8438...</small>	<table border="1" style="width: 100%; height: 60px;"> <tr> <td style="text-align: center;">APPROVED FOR PAYMENT</td> </tr> </table>	APPROVED FOR PAYMENT
APPROVED FOR PAYMENT			
APPROVED FOR PAYMENT DATE: 06/08/2022	DocuSigned by:  <small>signature:29F50CACDD064F8...</small>		

proof of payment

Invoice Overview (UNI Purchasing User)

Trading Partner	I & S Group Inc	Site	MANKATO		
Supplier Num	83599	Operating Unit	University of Northern I		
Invoice Num	82073	Type	Standard	Date	31-MAY-2022
Batch Name	ymb061022a	Currency	USD	Amount	11000.00
Voucher	637864	Release	4	Unpaid	0.00
PO Number	134221	Unapplied		Settlement Date	
Receipt Num		Description	Wellness Recreation Center Roof Replac		

Invoice Status

Approval	Not Required
Status	Validated
Accounting	Processed
Payment	Fully Paid

Active Hold	Reason
<input checked="" type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

Scheduled Payments

Curr	Amount	Remaining	Due Date
<input checked="" type="checkbox"/> USD	11000.00	0.00	31-MAY-2022
<input type="checkbox"/>			
<input type="checkbox"/>			

Actual Payments

Held	Paid By	Paid On
<input type="checkbox"/>	310535 - Electror	13-JUN-2022
<input type="checkbox"/>		
<input type="checkbox"/>		

Payment Overview View Receipt Supplier Invoice Workbench



I & S Group, Inc.
 115 E. Hickory St.
 Suite 300
 Mankato, MN 56001
 507-387-6651
 www.ISGInc.com

V00097817

University of Northern Iowa
 Facilities Management
 1801 W. 31st Street
 Cedar Falls, IA 50614-0530

Invoice Number 82776
 Date 06/30/2022

**Project 22-26304 UNI Wellness
 Center Roof Replacement - Cedar
 Falls, IA**

Progress billing for professional services provided through date of invoice

Progress Invoice through 6/30/22

Description	Contract Amount	Prior Billed	Current Billed
Construction Documents	\$36,000.00	\$36,000.00	
Bidding and Negotiation	\$2,400.00	\$1,000.00	\$1,400.00
Construction Administration	\$4,800.00		\$1,000.00
Records Documents	\$4,800.00		
Amendment 1 - Addl Investigation/Diagnostic	\$17,000.00	\$17,000.00	
Amendment 2 - Additional Scope	\$13,000.00		
Reimbursables			
	\$78,000.00	\$54,000.00	\$2,400.00

Invoice Amount \$2,400.00

Payment Terms: Net 30 days from invoice date. Past due balances are subject to late fees in the amount of 1.5% per month.
 If you have a question regarding your invoice or are interested in receiving invoices electronically, please e-mail AR@ISGInc.com

Automated Clearing House (ACH) Instructions

Account Name: I&S Group, Inc.
ABA/Routing Number: 073000642
Account Number: 2348642289
Send Remittance to: AR@ISGinc.com

*on to pay
 AES*

UNIVERSITY OF NORTHERN IOWA

FACILITIES MANAGEMENT - CEDAR FALLS, IA 50614-0530 -- PHONE 319-273-2611

INSTRUCTIONS

1. IF INVOICE CHARGES ARE ACCEPTED AND APPROVED, SIGN AND FORWARD.
2. IF INVOICE CHARGES ARE NOT ACCEPTABLE, RETURN VOUCHER WITH WRITTEN COMMENTS.

VOUCHER DATE:	7/13/2022	VENDOR'S INVOICE NO.	82776	UNI BLANKET P.O. 134221
DEPARTMENT		Facilities Management		INVOICE DATE
				6/30/2022
VENDOR NAME AND ADDRESS	I & S Group, Inc. 115 E. Hickory St., Suite 300 Mankato, MN 56001		SUPPLIER NUMBER	
			83599	

VOUCHER

QUANTITY SHIPPED	DESCRIPTION	UNIT PRICE	AMOUNT CHARGED
	Wellness Recreation Center Roof Replacement Phase 1		
	Maximum Contract Amount	\$48,000.00	
	Amendment No. 1	\$17,000.00	
	Basic Services Maximum	\$ 65,000.00	
	Date of Service: 6/1/22 - 6/30/22		
	Paid to Date	\$ 54,000.00	
	This Payment (VOU007847)	\$ 2,400.00	\$ 2,400.00
		\$ 56,400.00	
	Balance Remaining	\$ 8,600.00	
	Reimbursable Expenses		
	Paid to Date	\$ -	
	This Payment	\$ -	\$ -
		\$ -	
	Balance Remaining	\$ -	

DOES THIS VOUCHER COMPLETE THIS ORDER? **TOTAL** \$ 2,400.00

ACCOUNT	EXPENSE TYPE	NUMBER	AMOUNT	APPROVAL INITIALS
0204.00.00000.12720.0000.00.0000.000	Physical Plant	W22586700	\$ 2,400.00	

If additional lines are needed, please attach a separate sheet.

Total

Prepared by Laura Moody

APPROVED FOR PAYMENT

07/13/2022

DATE

DocuSigned by:

Amy Selzer

signature 8797CABB2ED9438...

APPROVED FOR PAYMENT

APPROVED FOR PAYMENT

07/16/2022

DATE

DocuSigned by:

Jose Luis San Miguel

signature 29F60CACDD064F8...

proof of payment

Invoice Overview (UNI Purchasing User)

Trading Partner	& S Group Inc		Site	MANKATO	
Supplier Num	83599		Operating Unit	University of Northern I	
Invoice Num	82776	Type	Standard	Date	30-JUN-2022
Batch Name	ymb071922a	Currency	USD	Amount	2400.00
Voucher	638518	Release	5	Unpaid	0.00
PO Number	134221			Unapplied	
Receipt Num				Settlement Date	

Invoice Status

Approval	Not Required
Status	Validated
Accounting	Processed
Payment	Fully Paid

Description: Wellness Recreation Center Roof Replac

Active Hold	Reason
<input checked="" type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

Scheduled Payments

Curr	Amount	Remaining	Due Date
<input checked="" type="checkbox"/> USD	2400.00	0.00	30-JUN-2022
<input type="checkbox"/>			
<input type="checkbox"/>			

Actual Payments

Held	Paid By	Paid On
<input type="checkbox"/>	311705 - Electror	20-JUL-2022
<input type="checkbox"/>		
<input type="checkbox"/>		

Payment Overview View Receipt Supplier Invoice Workbench



I & S Group, Inc.
 115 E. Hickory St.
 Suite 300
 Mankato, MN 56001
 507-387-6651
 www.ISGInc.com

University of Northern Iowa
 Facilities Management
 1801 W. 31st Street
 Cedar Falls, IA 50614-0530

Invoice Number 90293
 Date 02/28/2023

**Project 22-26304 UNI Wellness
 Center Roof Replacement - Cedar
 Falls, IA**

Progress billing for professional services provided through date of invoice

Progress Invoice through 2/28/2023

Description	Contract Amount	Prior Billed	Current Billed
Construction Documents	\$36,000.00	\$36,000.00	
Bidding and Negotiation	\$2,400.00	\$2,400.00	
Construction Administration	\$4,800.00	\$3,500.00	
Records Documents	\$4,800.00		
Amendment 1 - Addl Investigation/Diagnostic	\$17,000.00	\$17,000.00	
Amendment 2 - Phase I: Vapor Study + Report	\$10,000.00	\$5,000.00	\$5,000.00
Reimbursables			
	\$75,000.00	\$63,900.00	\$5,000.00

Invoice Amount \$5,000.00

Payment Terms: Net 30 days from invoice date. Past due balances are subject to late fees in the amount of 1.5% per month. If you have a question regarding your invoice or are interested in receiving invoices electronically, please e-mail AR@ISGInc.com

Automated Clearing House (ACH) Instructions

Account Name: I&S Group, Inc.
 ABA/Routing Number: 073000642
 Account Number: 2348642289
 Send Remittance to: AR@ISGInc.com

*ok to pay
 a&d*

UNIVERSITY OF NORTHERN IOWA

FACILITIES MANAGEMENT - CEDAR FALLS, IA 50614-0530 -- PHONE 319-273-2611

INSTRUCTIONS

1. IF INVOICE CHARGES ARE ACCEPTED AND APPROVED, SIGN AND FORWARD.
2. IF INVOICE CHARGES ARE NOT ACCEPTABLE, RETURN VOUCHER WITH WRITTEN COMMENTS.

VOUCHER DATE:	3/1/2023	VENDOR'S INVOICE NO.	90293	UNI BLANKET P.O. 134221
DEPARTMENT		Facilities Management		INVOICE DATE
				2/28/2023
VENDOR NAME AND ADDRESS	I & S Group, Inc. 115 E. Hickory St., Suite 300 Mankato, MN 56001		SUPPLIER NUMBER	
			83599	

VOUCHER

QUANTITY SHIPPED	DESCRIPTION	UNIT PRICE	AMOUNT CHARGED
	Wellness Recreation Center Roof Replacement Phase 1		
	Original Contract Amount	\$48,000.00	
	Amendment No. 1	\$17,000.00	
	Amendment No. 2	\$10,000.00	
	Basic Services Maximum Date of Service: 02/01/2023 - 02/28/2023	\$75,000.00	
	Paid to Date	\$ 63,900.00	
	This Payment (VOU008122)	\$ 5,000.00	
		\$ 68,900.00	\$ 5,000.00
	Balance Remaining	\$ 6,100.00	
	Reimbursable Expenses		
	Paid to Date	\$ -	
	This Payment	\$ -	
		\$ -	\$ -
	Balance Remaining	\$ -	

DOES THIS VOUCHER COMPLETE THIS ORDER? **TOTAL** \$ 5,000.00

ACCOUNT	EXPENSE TYPE	NUMBER	AMOUNT	APPROVAL INITIALS
0204.00.00000.12720.0000.00.0000.000	Physical Plant	W22586700	\$ 5,000.00	

If additional lines are needed, please attach a separate sheet.

Prepared by Laura Moody APPROVED FOR PAYMENT DATE: 03/02/2023 signature: <i>Amy Selzer</i> DocuSigned by: 8797CA6B2ED9438...	APPROVED FOR PAYMENT <div style="border: 1px solid black; height: 50px; width: 100%;"></div>	Total
APPROVED FOR PAYMENT DATE: 03/02/2023 signature: <i>Jose Luis San Miguel</i> DocuSigned by: 29F80CACDD064F8...		

proof of payment

Invoice Overview (UNI Purchasing User)

Trading Partner	I & S Group Inc	Site	MANKATO		
Supplier Num	83599	Operating Unit	University of Northern I		
Invoice Num	90293	Type	Standard	Date	28-FEB-2023
Batch Name	ymb030623a	Currency	USD	Amount	5000.00
Voucher	643439	Release	10	Unpaid	0.00
PO Number	134221	Unapplied		Settlement Date	
Receipt Num		Description	2/1-2/28/23 Wellness Recreation Ctr Roc		

Invoice Status

Approval	Not Required
Status	Validated
Accounting	Processed
Payment	Fully Paid

Active Hold	Reason
<input checked="" type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

Scheduled Payments

Curr	Amount	Remaining	Due Date
<input checked="" type="checkbox"/> USD	5000.00	0.00	28-FEB-2023
<input type="checkbox"/>			
<input type="checkbox"/>			

Actual Payments

Held	Paid By	Paid On
<input type="checkbox"/>	324123 - Electror	06-MAR-2023
<input type="checkbox"/>		
<input type="checkbox"/>		

Payment Overview View Receipt Supplier Invoice Workbench



I & S Group, Inc.
 115 E. Hickory St.
 Suite 300
 Mankato, MN 56001
 507-387-6651
 www.ISGInc.com

University of Northern Iowa
 Facilities Management
 1801 W. 31st Street
 Cedar Falls, IA 50614-0530

Invoice Number 98539
 Date 10/31/2023

**Project 22-26304 UNI Wellness
 Center Roof Replacement - Cedar
 Falls, IA**

Progress billing for professional services provided through date of invoice

Progress Invoice through 10/31/23

Description	Contract Amount	Prior Billed	Current Billed
Construction Documents	\$36,000.00	\$36,000.00	
Bidding and Negotiation	\$2,400.00	\$2,400.00	
Construction Administration	\$4,800.00	\$4,800.00	
Records Documents	\$4,800.00		\$4,800.00
Amendment 1 - Addl Investigation/Diagnostic	\$17,000.00	\$17,000.00	
Amendment 2 - Phase I: Vapor Study + Report	\$10,000.00	\$10,000.00	
Reimbursables			
	\$75,000.00	\$70,200.00	\$4,800.00

Invoice Amount \$4,800.00

Payment Terms: Net 30 days from invoice date. Past due balances are subject to late fees in the amount of 1.5% per month.
 If you have a question regarding your invoice or are interested in receiving invoices electronically, please e-mail AR@ISGInc.com

Automated Clearing House (ACH) Instructions

Account Name: I&S Group, Inc.
 ABA/Routing Number: 073000642
 Account Number: 2348642289
 Send Remittance to: AR@ISGinc.com

*ok to pay
 ARS*

Name I & S Group Inc - MANKATO

Invoice Date 10/31/23
PO Number 134221

DESIGN PROFESSIONAL INVOICE FORM

Project Title Wellness Recreation Center Roof Replacement Phase 1
For Period 10/1/23 to 10/31/23
Invoice Number 98539

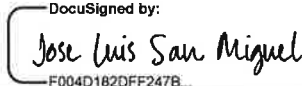
Description	Contract Amount	Percent Work To Date	Amount Billed to Date	Previous Amount Billed	Current Invoice Amount Billed
Construction Documents	\$36,000.00	100.00	\$36,000.00	\$36,000.00	\$ 0.00
Bidding and Negotiation	\$2,400.00	100.00	\$2,400.00	\$2,400.00	\$ 0.00
Construction Administration	\$4,800.00	100.00	\$4,800.00	\$4,800.00	\$ 0.00
Record Documents	\$4,800.00	100.00	\$4,800.00	\$ 0.00	\$4,800.00
Amendment 1 - Addl Investigation/Diagnostic	\$17,000.00	100.00	\$17,000.00	\$17,000.00	\$ 0.00
Amendment 2 - Phase I: Vapor Study + Report	\$10,000.00	100.00	\$10,000.00	\$10,000.00	\$ 0.00
TOTAL	\$75,000.00	100.00	\$75,000.00	\$70,200.00	\$4,800.00

TOTAL AMOUNT DUE \$4,800.00

Approved University of Northern Iowa – Design Project Manager

By:  Date: 11/08/2023

Approved University of Northern Iowa – Final Approver

By:  Date: 11/08/2023

proof of payment

Invoice Overview (UNI Purchasing User)

Trading Partner	& S Group Inc	Site	MANKATO		
Supplier Num	83599	Operating Unit	University of Northern I		
Invoice Num	98539	Type	Standard	Date	31-OCT-2023
Batch Name	mkw111623a	Currency	USD	Amount	4800.00
Voucher	646938	Release	14	Unpaid	0.00
PO Number	134221	Unapplied		Settlement Date	
Receipt Num		Description	Wellness Recreation Center Roof Replac		

Invoice Status

Approval	Not Required
Status	Validated
Accounting	Processed
Payment	Fully Paid

Scheduled Payments				Actual Payments			
	Curr	Amount	Remaining	Due Date	Held	Paid By	Paid On
<input checked="" type="checkbox"/>	USD	4800.00	0.00	30-NOV-2023	<input type="checkbox"/>	334970 - Electror	27-NOV-2023
<input type="checkbox"/>					<input type="checkbox"/>		
<input type="checkbox"/>					<input type="checkbox"/>		

Payment OverviewView ReceiptSupplierInvoice Workbench

AIA Type Document
Application and Certification for Payment

TO (OWNER): University of Northern Iowa Accounts Payable GIL 103 0008 Cedar Falls, IA 50614	PROJECT: UNI WRC Phase I Roof Replace	APPLICATION NO: 3 PERIOD TO: 5/31/2023	DISTRIBUTION TO: <input type="checkbox"/> OWNER <input type="checkbox"/> ARCHITECT <input checked="" type="checkbox"/> CONTRACTOR
FROM (CONTRACTOR): Black Hawk Roof Co., Inc 619 E 19th St Cedar Falls, IA 50613	VIA (ARCHITECT):	ARCHITECT'S PROJECT NO:	

CONTRACT FOR:

CONTRACT DATE:

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for Payment, as shown below, in connection with the Contract Continuation Sheet, AIA Type Document is attached.

1. ORIGINAL CONTRACT SUM	\$	1,991,338.00
2. Net Change by Change Orders	\$	6,196.91
3. CONTRACT SUM TO DATE (Line 1 + 2)	\$	1,997,534.91
4. TOTAL COMPLETED AND STORED TO DATE	\$	1,726,027.96
5. RETAINAGE:		
a. 5.00% of Completed Work	\$	86,301.40
b. 0.00% of Stored Material	\$	0.00
Total retainage (Line 5a + 5b)	\$	86,301.40
6. TOTAL EARNED LESS RETAINAGE (Line 4 less Line 5 Total)	\$	1,639,726.56
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate)	\$	1,491,049.98
8. CURRENT PAYMENT DUE	\$	148,676.58
9. BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6)	\$	357,808.35

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
Total changes approved in previous months by Owner	0.00	0.00
Total approved this Month	6,196.91	0.00
TOTALS	6,196.91	0.00
NET CHANGES by Change Order	6,196.91	

DocuSigned by:
Dan Kittgers
5FA527A4C5A44D1... 05/31/2023

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: Black Hawk Roof Co., Inc
619 E. 19th St Cedar Falls, IA 50613

By:  Date: 5/24/23

State of: IA

County of: Black Hawk

Subscribed and Sworn to before me this 24 Day of May 20 23

Notary Public: 
My Commission Expires: 2/1/24



ARCHITECT'S CERTIFICATE FOR PAYMENT

In Accordance with the Contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to 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 \$ **148,676.58**

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

DocuSigned by:
ARCHITECT: *Nathan Compton - ISG* Date: 05/30/2023
By:  F9AED0FAE4704B0

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.

DocuSigned by:
Phillip O'Loughlin 05/31/2023
AAFD82758DD0A4F

**AIA Type Document
Application and Certification for Payment**

TO (OWNER): University of Northern Iowa Accounts Payable GIL 103 0008 Cedar Falls, IA 50614	PROJECT: UNI WRC Phase I Roof Replace	APPLICATION NO: 3 PERIOD TO: 5/31/2023	DISTRIBUTION TO: - OWNER - ARCHITECT - CONTRACTOR
---	--	---	---

FROM (CONTRACTOR): Black Hawk Roof Co., Inc 619 E. 19th St Cedar Falls, IA 50613	VIA (ARCHITECT):	ARCHITECT'S PROJECT NO:
---	-------------------------	--------------------------------

CONTRACT FOR:	CONTRACT DATE:
----------------------	-----------------------

ITEM	DESCRIPTION	SCHEDULE VALUE	PREVIOUS APPLICATIONS	COMPLETED THIS PERIOD	STORED MATERIAL	COMPLETED STORED	%	BALANCE	RETAINAGE
1	General Requirements	99,567.00	49,783.50	24,891.75	0.00	74,675.25	75.00	24,891.75	3,733.76
EPDM									
2	Labor	376,238.00	225,742.80	0.00	0.00	225,742.80	60.00	150,495.20	11,287.14
3	Material	866,980.00	866,980.00	0.00	0.00	866,980.00	100.00	0.00	43,349.00
Kee									
4	Labor	125,413.00	0.00	125,413.00	0.00	125,413.00	100.00	0.00	6,270.65
5	Material	427,020.00	427,020.00	0.00	0.00	427,020.00	100.00	0.00	21,351.00
Sheet Metal									
6	Labor	24,920.00	0.00	0.00	0.00	0.00	0.00	24,920.00	0.00
7	Material	71,200.00	0.00	0.00	0.00	0.00	0.00	71,200.00	0.00
8	PR/IDC04 Wet Insulation	6,196.91	0.00	6,196.91	0.00	6,196.91	100.00	0.00	309.85
REPORT TOTALS		\$1,997,534.91	\$1,569,526.30	\$156,501.66	\$0.00	\$1,726,027.96	86.41	\$271,506.95	\$86,301.40

prod of payment

Invoice Overview (UNI Purchasing User)

Trading Partner	Black Hawk Roof Co Inc	Site	Cedar Falls
Supplier Num	11651	Operating Unit	University of Northern I
Invoice Num	136496-Pay App No. 03	Type	Standard
Batch Name	ymb060123a	Currency	USD
Voucher	644499	Amount	148676.58
PO Number	136496	Unpaid	0.00
Receipt Num		Release	3
Invoice Status		Unapplied	
Approval	Not Required	Settlement Date	
Status	Validated	Description	12/1/22-5/31/23 Wellness Recreation Ctr
Accounting	Processed	Active Hold	
Payment	Fully Paid	Reason	

Scheduled Payments				Actual Payments		
Curr	Amount	Remaining	Due Date	Held	Paid By	Paid On
<input checked="" type="checkbox"/> USD	148676.58	0.00	31-MAY-2023	<input type="checkbox"/>	327362 - Electror	02-JUN-2023
<input type="checkbox"/>				<input type="checkbox"/>		
<input type="checkbox"/>				<input type="checkbox"/>		

Buttons: Payment Overview, View Receipt, Supplier, Invoice Workbench

AIA Type Document
Application and Certification for Payment

TO (OWNER): University of Northern Iowa Accounts Payable GIL 103 0008 Cedar Falls, IA 50614	PROJECT: UNI WRC Phase I Roof Replace	APPLICATION NO: 4 PERIOD TO: 6/30/2023	DISTRIBUTION TO: <input type="checkbox"/> OWNER <input type="checkbox"/> ARCHITECT <input checked="" type="checkbox"/> CONTRACTOR
FROM (CONTRACTOR): Black Hawk Roof Co., Inc 619 E. 19th St Cedar Falls, IA 50613	VIA (ARCHITECT):	ARCHITECT'S PROJECT NO:	

CONTRACT FOR:

CONTRACT DATE:

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for Payment, as shown below, in connection with the Contract. Continuation Sheet, AIA Type Document is attached

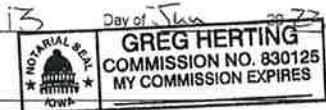
1. ORIGINAL CONTRACT SUM	\$	1,991,338.00
2. Net Change by Change Orders	\$	84,047.87
3. CONTRACT SUM TO DATE (Line 1 + 2)	\$	2,075,385.87
4. TOTAL COMPLETED AND STORED TO DATE	\$	2,075,385.87
5. RETAINAGE:		
a. 5.00% of Completed Work	\$	103,769.30
b. 0.00% of Stored Material	\$	0.00
Total retainage (Line 5a + 5b)	\$	103,769.30
6. TOTAL EARNED LESS RETAINAGE (Line 4 less Line 5 Total)	\$	1,971,616.57
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate)		
	\$	1,639,726.56
8. CURRENT PAYMENT DUE	\$	331,890.01
9. BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6)	\$	103,769.30

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: Black Hawk Roof Co., Inc
619 E. 19th St Cedar Falls, IA 50613

By: [Signature] Date: 6/13/23

State of: IA
County of: Black Hawk
Subscribed and Sworn to before me this
Notary Public: [Signature]
My Commission Expires: 2/11/24



ARCHITECT'S CERTIFICATE FOR PAYMENT

In Accordance with the Contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to 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. 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	6,196.91	0.00
Total approved this Month	77,850.96	0.00
TOTALS	84,047.87	0.00
NET CHANGES by Change Order	84,047.87	

University of Northern Iowa
APPLICATION FOR PAYMENT

PAYC - 4
Page 3 of 3

This is to certify that the work listed hereon has been completed in accordance with the Contract Documents and that all lawful charges for labor, materials, etc. covered by previous applications have been paid.

Work in Place From Previous Application(s)	\$1,726,027.96
Work Completed This Period	\$349,357.91
Total Materials Presently Stored	\$ 0.00

CONSTRUCTOR: Black Hawk Roof Co Inc - Cedar Falls

TOTAL COMPLETED AND STORED TO DATE \$2,075,385.87

By: 
68FD9876AE04E6

Retainage: (Withholding 5% from Total Completed and Stored to Date)	\$103,769.30
Less Previous Amount Requested	\$1,639,726.56

Date: 06/20/2023

CURRENT PAYMENT DUE \$331,890.01

RECOMMEND ACCEPTANCE: DESIGN PROFESSIONAL

APPROVED: UNIVERSITY OF NORTHERN IOWA

By: 
C2540D03FE534E6

Date: 06/20/2023

By: 
4CF8097128E8401

Date: 06/20/2023

By: 
31EF373C2DAF40E

Date: 06/20/2023

proof of payment

Invoice Overview (UNI Purchasing User)

Trading Partner	Black Hawk Roof Co Inc	Site	Cedar Falls
Supplier Num	11651	Operating Unit	University of Northern I
Invoice Num	136496-Pay App No. 04	Type	Standard
Batch Name	ymb062123a	Currency	USD
Voucher	644772	Amount	331890.01
PO Number	136496	Unpaid	0.00
Receipt Num		Release	4
		Unapplied	
		Settlement Date	

Invoice Status

Approval	Not Required
Status	Validated
Accounting	Processed
Payment	Fully Paid

Description: 6/1-30/23 Wellness Recreation Ctr Roof I

Active Hold	Reason
<input checked="" type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

Scheduled Payments

Curr	Amount	Remaining	Due Date
<input checked="" type="checkbox"/> USD	331890.01	0.00	21-JUN-2023
<input type="checkbox"/>			
<input type="checkbox"/>			

Actual Payments

Held	Paid By	Paid On
<input type="checkbox"/>	328160 - Electror	22-JUN-2023
<input type="checkbox"/>		
<input type="checkbox"/>		

Buttons: Payment Overview, View Receipt, Supplier, Invoice Workbench

**AIA Type Document
Application and Certification for Payment**

TO (OWNER): University of Northern Iowa
Accounts Payable
GIL 103 0008
Cedar Falls, IA 50614

PROJECT: UNI WRC Phase I Roof Replace

APPLICATION NO: 5
PERIOD TO: 10/31/2023

DISTRIBUTION TO:
- OWNER
- ARCHITECT
- CONTRACTOR

FROM (CONTRACTOR): Black Hawk Roof Co., Inc
619 E. 19th St
Cedar Falls, IA 50613

VIA (ARCHITECT):

**ARCHITECT'S
PROJECT NO:**

CONTRACT FOR:

CONTRACT DATE:

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for Payment, as shown below, in connection with the Contract.
Continuation Sheet, AIA Type Document is attached.

1. ORIGINAL CONTRACT SUM	\$	<u>1,991,338.00</u>
2. Net Change by Change Orders	\$	<u>125,879.16</u>
3. CONTRACT SUM TO DATE (Line 1 + 2)	\$	<u>2,117,217.16</u>
4. TOTAL COMPLETED AND STORED TO DATE	\$	<u>2,117,217.16</u>
5. RETAINAGE:		
a. <u>5.00%</u> of Completed Work	\$	<u>105,860.86</u>
b. <u>0.00%</u> of Stored Material	\$	<u>0.00</u>
Total retainage (Line 5a + 5b)	\$	<u>105,860.86</u>
6. TOTAL EARNED LESS RETAINAGE	\$	<u>2,011,356.30</u>
(Line 4 less Line 5 Total)		
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate)	\$	<u>1,971,616.57</u>
8. CURRENT PAYMENT DUE	\$	<u>39,739.73</u>
9. BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6)	\$	<u>105,860.86</u>

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
Total changes approved in previous months by Owner	84,047.87	0.00
Total approved this Month	41,831.29	0.00
TOTALS	125,879.16	0.00
NET CHANGES by Change Order	125,879.16	

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: Black Hawk Roof Co., Inc
619 E. 19th St Cedar Falls, IA 50613

By: [Signature] Date: 10/24/23

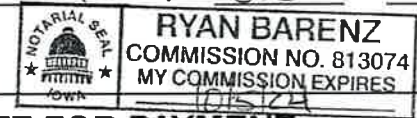
State of: IA

County of: Black Hawk

Subscribed and Sworn to before me this 24 Day of Oct 2023

Notary Public: [Signature]

My Commission Expires: 10/15/24



ARCHITECT'S CERTIFICATE FOR PAYMENT

In Accordance with the Contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to 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. 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.

University of Northern Iowa
APPLICATION FOR PAYMENT

PAYC - 5
Page 3 of 3

This is to certify that the work listed hereon has been completed in accordance with the Contract Documents and that all lawful charges for labor, materials, etc. covered by previous applications have been paid.

Work in Place From Previous Application(s)	\$2,075,385.87
Work Completed This Period	\$41,831.29
Total Materials Presently Stored	\$ 0.00

CONSTRUCTOR: Black Hawk Roof Co Inc - Cedar Falls

TOTAL COMPLETED AND STORED TO DATE \$2,117,217.16

Retainage: (Withholding 5% from Total Completed and Stored to Date)	\$105,860.86
Less Previous Amount Requested	\$1,971,616.57

By: 
DocuSigned by:
Ryan Barus
334674E678B9467

CURRENT PAYMENT DUE \$39,739.73

Date: 10/25/2023

RECOMMEND ACCEPTANCE: DESIGN PROFESSIONAL
I & S Group Inc - WATERLOO

APPROVED: UNIVERSITY OF NORTHERN IOWA
Final Approver

By: 
DocuSigned by:
Nathan Compton
C2540D03FES34E6

By: 
DocuSigned by:
Phillip O'Loughlin
4CF8097128E8401

Date: 10/26/2023

Date: 10/30/2023

APPROVED: UNIVERSITY OF NORTHERN IOWA
Construction Project Manager

By: 
DocuSigned by:
Dan Kittgers
31EF373C2DAF40E

Date: 10/27/2023

proof of payment

Invoice Overview (UNI Purchasing User)

Trading Partner	Black Hawk Roof Co Inc	Site	Cedar Falls
Supplier Num	11651	Operating Unit	University of Northern I
Invoice Num	136496 - Pay App No. 0	Type	Standard
Batch Name	kjb110623a	Currency	USD
Voucher	646687	Amount	39739.73
PO Number	136496	Unpaid	0.00
Receipt Num		Release	5
		Unapplied	
		Settlement Date	

Invoice Status

Approval	Not Required
Status	Validated
Accounting	Processed
Payment	Fully Paid

Description: Construction Contract for "Wellness Rec"

Active Hold	Reason
<input checked="" type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

Scheduled Payments

Curr	Amount	Remaining	Due Date
<input checked="" type="checkbox"/> USD	39739.73	0.00	24-OCT-2023
<input type="checkbox"/>			
<input type="checkbox"/>			

Actual Payments

Paid By	Paid On
<input type="checkbox"/> 334266 - Electror	07-NOV-2023
<input type="checkbox"/>	
<input type="checkbox"/>	

Buttons: Payment Overview, View Receipt, Supplier, Invoice Workbench

**AIA Type Document
Application and Certification for Payment**

TO (OWNER): University of Northern Iowa
Accounts Payable
GIL 103 0008
Cedar Falls, IA 50614

PROJECT: UNI WRC Phase I Roof Replace

APPLICATION NO: 6
PERIOD TO: 10/31/2023

DISTRIBUTION TO:
 OWNER
 ARCHITECT
 CONTRACTOR

FROM (CONTRACTOR): Black Hawk Roof Co., Inc
619 E. 19th St
Cedar Falls, IA 50613

VIA (ARCHITECT):

**ARCHITECT'S
PROJECT NO:**

CONTRACT FOR:

CONTRACT DATE:

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for Payment, as shown below, in connection with the Contract. Continuation Sheet, AIA Type Document is attached.

1. ORIGINAL CONTRACT SUM	\$	<u>1,991,338.00</u>
2. Net Change by Change Orders	\$	<u>125,879.16</u>
3. CONTRACT SUM TO DATE (Line 1 + 2)	\$	<u>2,117,217.16</u>
4. TOTAL COMPLETED AND STORED TO DATE	\$	<u>2,117,217.16</u>
5. RETAINAGE:		
a. <u>0.00%</u> of Completed Work	\$	<u>0.00</u>
b. <u>0.00%</u> of Stored Material	\$	<u>0.00</u>
Total retainage (Line 5a + 5b)	\$	<u>0.00</u>
6. TOTAL EARNED LESS RETAINAGE	\$	<u>2,117,217.16</u>
(Line 4 less Line 5 Total)		
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate)	\$	<u>2,011,356.30</u>
8. CURRENT PAYMENT DUE	\$	<u>105,860.86</u>
9. BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6)	\$	<u>0.00</u>

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
Total changes approved in previous months by Owner	84,047.87	0.00
Total approved this Month	41,831.29	0.00
TOTALS	125,879.16	0.00
NET CHANGES by Change Order	125,879.16	

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: Black Hawk Roof Co., Inc
619 E. 19th St Cedar Falls, IA 50613

By: [Signature] Date: 10/25/23

State of: IA

County of: Black Hawk

Subscribed and Sworn to before me this 25 Day of Oct 20 23

Notary Public: [Signature]

My Commission Expires: 2/11/24



ARCHITECT'S CERTIFICATE FOR PAYMENT

In Accordance with the Contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to 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. 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.

University of Northern Iowa
APPLICATION FOR PAYMENT

PAYC - 6
Page 3 of 3

This is to certify that the work listed hereon has been completed in accordance with the Contract Documents and that all lawful charges for labor, materials, etc. covered by previous applications have been paid.

Work in Place From Previous Application(s)	\$2,117,217.16
Work Completed This Period	\$ 0.00
Total Materials Presently Stored	\$ 0.00

CONSTRUCTOR: Black Hawk Roof Co Inc - Cedar Falls

TOTAL COMPLETED AND STORED TO DATE \$2,117,217.16

Retainage: (Withholding 5% from Total Completed and Stored to Date)	\$ 0.00
Less Previous Amount Requested	\$2,011,356.30

By: DocuSigned by:
Ryan Barenz
334674E878B9467

CURRENT PAYMENT DUE \$105,860.86

Date: 12/08/2023

RECOMMEND ACCEPTANCE: DESIGN PROFESSIONAL
I & S Group Inc - WATERLOO

APPROVED: UNIVERSITY OF NORTHERN IOWA
Final Approver

By: DocuSigned by:
Nathan Compton
C2540D03FE534E8

By: DocuSigned by:
Phillip O'Loughlin
4CF8087128E8401

Date: 12/11/2023

Date: 12/12/2023

APPROVED: UNIVERSITY OF NORTHERN IOWA
Construction Project Manager

By: DocuSigned by:
Dan Kitzgers
31EF373C2DAF40E...

Date: 12/11/2023

proof of payment

Invoice Overview (UNI Purchasing User)

Trading Partner	Black Hawk Roof Co Inc	Site	Cedar Falls
Supplier Num	11651	Operating Unit	University of Northern I
Invoice Num	136496 - Pay App No. 0	Type	Standard
Batch Name	mkw121223a	Currency	USD
Voucher	647200	Amount	105860.86
PO Number	136496	Unpaid	0.00
Receipt Num		Release	6
		Unapplied	
		Settlement Date	

Invoice Status

Approval	Not Required
Status	Validated
Accounting	Processed
Payment	Fully Paid

Description: 11/1-11/30/23 Wellness Recreation Cent

Active Hold	Reason
<input checked="" type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

Scheduled Payments				Actual Payments		
Curr	Amount	Remaining	Due Date	Held	Paid By	Paid On
<input checked="" type="checkbox"/> USD	105860.86	0.00	27-NOV-2023	<input type="checkbox"/>	336031 - Electror	13-DEC-2023
<input type="checkbox"/>				<input type="checkbox"/>		
<input type="checkbox"/>				<input type="checkbox"/>		

Buttons: Payment Overview, View Receipt, Supplier, Invoice Workbench

proof of payment

Project: Wellness Recreation Center Roof Replacement Phase 1
Description: FM Design & Construction Fees (UNI)
Line Item: 1140
Assumption:
Allow Charges:
Approval Required For Change:

Financial Summary Notes (0) Budget Changes (2) Commitments (1) Commitment Changes (2) Actual Costs (20) Custom Fields (0) Documents (0) Forms (0) Processes (0)

Show: Go

Inv #	Invoice Desc	Commitment	Company	Date Received	Status	Total Invoice Amount	Invoice Amount This Line Item
WO 48815-Classic line 1	FM Design Fees assessment		UNI internal	03.31.2022	Paid	554.85	554.8
WO 48815-Classic line 2	FM Design Fees assessment		UNI internal	04.30.2022	Paid	633.79	633.7
WO 48815-Classic line 3	FM Design Fees assessment		UNI internal	05.31.2022	Paid	309.28	309.2
WO 48815-Classic line 4	FM Design Fees assessment		UNI internal	06.30.2022	Paid	413.79	413.7
WO 48815-Classic line 5	FM Design Fees assessment		UNI internal	07.29.2022	Paid	74.23	74.2
WO 48815-Classic line 6	FM Design Fees assessment		UNI internal	10.31.2022	Paid	40,595.52	40,595.5
WO 48815-Classic line 7	FM Design Fees assessment		UNI internal	11.30.2022	Paid	113.25	113.2
WO 48815-Classic line 8	FM Design Fees assessment		UNI internal	12.22.2022	Paid	5,542.67	5,542.6
WO 48815-Classic line 9	FM Design Fees assessment		UNI internal	01.31.2023	Paid	34.07	34.0
WO 48815-Classic line 10	FM Design Fees assessment		UNI internal	02.28.2023	Paid	190.06	190.0
WO 48815-Classic line 11	FM Design Fees assessment		UNI internal	03.31.2023	Paid	222.79	222.7
WO 48815-Classic line 12	FM Design Fees assessment		UNI internal	04.28.2023	Paid	193.14	193.1
WO 48815-Line 1	Invoice	FM48815 - Facilities Management Design Fees	UNI Internal Commitments DO NOT USE on PREQs	05.31.2023	Paid	214.29	214.2
WO 48815-Line 2	Invoice	FM48815 - Facilities Management Design Fees	UNI Internal Commitments DO NOT USE on PREQs	06.30.2023	Paid	19,376.38	19,376.3
WO 48815-Line 3	Invoice	FM48815 - Facilities Management Design Fees	UNI Internal Commitments DO NOT USE on PREQs	07.31.2023	Paid	762.34	762.3
WO 48815-Line 4	Invoice	FM48815 - Facilities Management Design Fees	UNI Internal Commitments DO NOT USE on PREQs	08.31.2023	Paid	1,081.42	1,081.4
WO 48815-Line 5	Invoice	FM48815 - Facilities Management Design Fees	UNI Internal Commitments DO NOT USE on PREQs	09.30.2023	Paid	433.22	433.2
WO 48815-Line 6	Invoice	FM48815 - Facilities Management Design Fees	UNI Internal Commitments DO NOT USE on PREQs	10.31.2023	Paid	1.25	1.2
WO 48815-Line 8	Invoice	FM48815 - Facilities Management Design Fees	UNI Internal Commitments DO NOT USE on PREQs	11.30.2023	Paid	1,787.08	1,787.0
WO 48815-Line 10	Invoice	FM48815 - Facilities Management Design Fees	UNI Internal Commitments DO NOT USE on PREQs	12.24.2023	Paid	4,322.63	4,322.6
Totals						76,856.05	76,856.05

Newton, Victoria [TOS]

From: Sarah Harms <sarah.harms@uni.edu>
Sent: Friday, March 22, 2024 3:41 PM
To: Hollingsworth, Tammy [AOS]
Cc: ExecutiveCouncil [TOS]
Subject: Re: Final Report: 12-15-21 Wind Storm

Tammy -

I think I have a simple explanation, but it can also sound confusing! When the storm came through and damaged the roof, only parts of the roof were damaged (roof 3 and 12b). However, once the work began we decided to repair more of the roof. So the invoices I submitted are just for the roof areas related to the wind damage. ISG and Black Hawk Roof did additional work on the WRC at the same time and therefore submitted other invoices that aren't related to the claim. Also, these two vendors assisted with the roof repair for Nielsen Fieldhouse, which was also damaged by the wind storm. That part of the 29c20 claim has already been processed (which was submission #1 of this claim). I hope that helps but if you need anything else, or would prefer a call/zoom let me know.

Thanks - and have a good weekend,
Sarah

On Wed, Mar 20, 2024 at 9:03 AM Tammy Hollingsworth <Tammy.Hollingsworth@aos.iowa.gov> wrote:

Sarah,

I have a couple of questions regarding this request.

1. For the I&S Group claims, total request of \$66,200.00. When looking at the support, I noticed the following. For invoice #90293, the prior billed amount is \$63,900, but according to the payments the total paid has only been \$56,400. For invoice #98539, the prior billed amount is \$70,200, but according to the payments the total paid has only been \$61,400. I'm wondering if there are some invoices missing from the request? Or is it possible that the prior billed amounts per the vendor invoices are incorrect? The total contract is for \$75,000, with only \$66,200 in payments, a difference of \$8,800, which is the difference on the last invoice between the prior billed amount and payments noted.
2. For the Black Hawk Roof Co, Inc invoices, why are we starting with application #3? Do the previous payments of \$1,491,049.98 not qualify for 29C.20 reimbursement?

Tammy

From: Sarah Harms <sarah.harms@uni.edu>
Sent: Friday, March 1, 2024 4:25 PM
To: Nash, John C [BOARD] <john.nash@iowaregents.edu>; ExecutiveCouncil [TOS] <ExecutiveCouncil@tos.iowa.gov>; Tammy Hollingsworth <Tammy.Hollingsworth@AOS.IOWA.GOV>
Subject: Final Report: 12-15-21 Wind Storm

CAUTION: This email originated from outside of AOS. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good Morning -

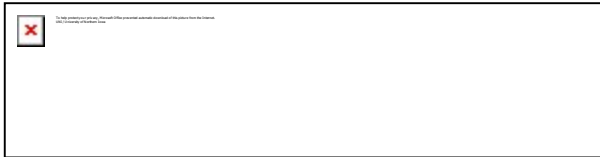
Please see the attached final report regarding damage due to a wind storm on UNI's campus on Dec. 15, 2021. This relates to AOS Claim 2249.

Thank you,
Sarah

--

Sarah Harms
Assistant to the Senior Vice President

University of Northern Iowa
Office of the Senior Vice President for Finance & Operations
319-273-2382
122 LANG HALL / Cedar Falls, IA 50614-0003
uni.edu



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Auditor.Iowa.Gov

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Sarah Harms
Assistant to the Senior Vice President

University of Northern Iowa
Office of the Senior Vice President for Finance & Operations
319-273-2382
122 LANG HALL / Cedar Falls, IA 50614-0003
uni.edu

