Mississippi Home Corporation Request for Cash

HOME Homeowner Rehabilatation Program Program Section B: Project Information Section A: General Information Project No. Madison County Board Of Supervisors Recipient 1228-M16-SG-280-045 Mailing Address Post Office Box 608 Request No 125 West North Street Street Address Services Rendered 9 City, State Zip Canton, MS 39046 From MHC Staff Initials 601-855-5500 Thru Telephone No. 23-Mar-20 Section C: Request Per Activity Activity Description **Budget Amount** Total Received to Date This Request Remaining Balance Activity Numbers Application Fee \$5,000.00 \$5,000.00 \$0.00 \$0.00 Bertha Luckett Matlock \$188,850.00 \$3,750.00 \$41,100.00 \$144,000.00 3 Mary Black \$44,450.00 \$39,900.00 \$0.00 \$4,550.00 \$2,250.00 \$0.00 \$42,200.00 Rose Zettera Williams \$20,537.50 \$44,450.00 \$17,587.50 \$6,325.00 6 Willie Ann Johnson \$44,450.00 \$2,250.00 \$0.00 \$42,200.00 \$24,050.00 Paulette Wales \$44,450.00 \$20,400.00 \$0.00 Margie Brooks \$44,450.00 \$2,950.00 \$0.00 \$41,500.00 9 Wallace Ross \$44,450.00 \$1,450.00 \$43,000.00 10 \$0.00 \$0.00 \$0.00 \$0.00 Total: \$505,000.00 \$102,137.50 \$79,087.50 \$323,775.00 Required Accomplishement Narrative: (Please provide a brief update on this project. 100 % complete Rose Williams and Paulette Wales, Bertha Matlock 33% complete Foundation I Hereby Certify That (a) the services covered by this request have not been received from the Federal Government/State Government or expended for such services under any other contract agreement or grant; (b) the amount requested will be expended for allowable costs / expenditures under the terms of the contract agreement or grant; (c) the amount requested herein does not exceed the total funds obligated by contract; and (d) the funds are requested for only immediate disbursements. I Hereby Certify That the goods sold and/or services rendered have been delivered and/or performed in good order within the time listed above and are in compliance with all statutory requirements and regulations. I certify that this request does not include any advances or funds for future obligations. By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812). Is this your final request for cash on this contract? YES X NO James Curtis Smith 3/23/2020 Signature of Authorized Official Date Signed Prepared By **Date Prepared** Gerald Steen, President 601-214-5966 Typed Name and Title of Authorized Official Preparer's Telephone No. To be completed by MHC Authorized Official APPROVED BY: _ Signature, Authorized MHC Representative AUTHORIZED BY: ___ DATE: Signature, Authorized MHC Representative IDIS APPROVED BY: __ DATE: Signature, Authorized MHC Representative IDIS Voucher Numbe Vendor Number Issue/Series Fund/Sub-Fund Servicer

Page 1

Mississippi Home Corporation **Consolidated Support Sheet**

Program: Homeowner Rehabilitation Recipient

dison County Board Of Supervisors

Contract Number: Total Amount Requested:

1228-M16-SG-280-045

Request for Cash Number:

\$79,087.50

IDIS#	Line Items	Vendor	Invoice #	Total Invoice	Amount of This Request	Match	Amount Budgeted	Total Received to Date	Balance
	Application Fee	Sunbelt R&D	HOME 1601				\$5,000.00	\$5,000.00	\$0.00
	Total Administration			\$0.00	\$0.00	\$0.00	\$5,000.00	\$5,000.00	\$0.00
Home #1	Bertha Luckett Matlock						\$188,850.00	\$3,750.00	\$185,100.00
		Sunbelt R&D	1906	\$1,500.00	\$1,500.00				\$1,500.0
		KT Construction	3143	\$39,600.00	\$39,600.00				\$39,600.00
									(A.M. 1884)
Home #1	Control State of Control of Control			£44.400.00	£44.400.00	#0.00	#400.0E0.00	£44.050.00	\$0.00
Control of the latest and the latest	N. D. I			\$41,100.00	\$41,100.00	\$0.00	\$188,850.00	\$44,850.00	\$144,000.00
Home #2	Mary Black						\$44,450.00	\$39,900.00	\$4,550.00
		Sunbelt R&D							
		Sunbelt R&D							
		Skyline Innovations LLC							
Home #2				\$0.00	\$0.00	\$0.00	\$44,450.00	\$39,900.00	\$4,550.00
Home #3	Mary M. Austin						\$44,450.00	\$2,250.00	\$42,200.00
					19-0				\$0.00
									\$0.00
Home #3				\$0.00	\$0.00	\$0.00	\$44,450.00	\$2,250.00	\$42,200.00
Home #4	Rose Zettera Williams						\$44,450.00	\$20,537.50	\$23,912.50
		Sunbelt R&D	1606	\$2,250.00	\$2,250.00				\$2,250.0
		Sunbelt R&D							
		Skyline Innovations	2	\$15,337.50	\$15,337.50				
									\$0.00
Home #4				\$17,587.50	\$17,587.50	\$0.00	\$44,450.00	\$38,125.00	\$6,325.00
Home #5	Willie Ann Johnson						\$44,450.00	\$2,250.00	\$42,200.00
									\$0.00
1									\$0.00
Home #5				\$0.00	\$0.00	\$0.00	\$44,450.00	\$2,250.00	\$42,200.00
								\$73,687.50	

Hereby Certify That (a) the services covered by this request have not been received from the Federal / State Government or expended for such services under any other contract agreement or grant; (b) the amount requested will be expended for allowable costs / expenditures under any other contract agreement or grant; (b) the amount requested will be expended for allowable costs / expenditures under any other contract agreement or grant; (b) the amount requested will be expended for allowable costs / expenditures under any other contract agreement or grant; (b) the amount requested will be expended for allowable costs / expenditures under any other contract agreement or grant; (b) the amount requested will be expended for allowable costs / expenditures under any other contract agreement or grant; (c) the amount requested will be expended for allowable costs / expenditures under any other contract agreement or grant; (d) the amount requested will be expended for allowable costs / expenditures under any other contract agreement or grant; (e) the amount requested will be expended for allowable costs / expenditures under a grant agreement or
the terms of the contract agreement or grant; (c) the amount requested herein does not exceed the total funds obligated by contract; and (d) the funds are requested for only immediate disbursements.
I Hereby Certify That the goods sold and/or services rendered have been delivered and/or performed in good order within the time listed above and are in compliance with all statutory requirements and regulations. I certify that this request does not include any advances or funds for future obligations.

		James Curtis Smith	
Signature of Authorized Official	Date Signed	Prepared By	
Gerald Steen, President		601-214-5966	
Typed Name and Title of Authorized Official		Preparer's Telephone No.	_

Page 2

Mississippi Home Corporation **Consolidated Support Sheet**

Program: Homeowner Rebabilitation Recipient

dison County Board Of Supervisors

Contract Number:

1228-M16-SG-280-045

Request for Cash Number:

Total Amount Requested: \$79,087.50

IDIS#	Line Items	Vendor	Invoice #	Total Invoice	Amount of This Request	Match	Amount Budgeted	Total Received to Date	Balance
							据(法) [1] · [1] · [1] · [1] · [1] · [1] · [1] · [1] · [1] · [1] · [1] · [1] · [1] · [1] · [1] · [1] · [1] · [1]	於對於於例解的路區程	
Home #6	Paulette Wales						044.450.00	004.050.00	
nome #6	Paulette vvales	Sunbelt R&D	1000	04.550.00	04.550.00		\$44,450.00	\$24,050.00	\$20,400.00
			1606	\$1,550.00	\$1,550.00				\$1,550.00
		Skyline Inovations	2	\$18,850.00	\$18,850.00				\$18,850.00
Home #6			STATE OF THE PARTY	\$20,400.00	\$20,400.00	\$0.00	\$44,450.00	\$44,450.00	\$0.00
Home #7	Margie Brooks			\$20,400.00	\$20,400.00	\$0.00	\$44,450.00	\$2,950.00	\$41,500.00
ionic iii	Wargic Brooks	Sunbelt R&D	59 00 000 00000000000000000000000000000				\$44,450.00	\$2,950.00	\$41,500.00
		Sumbert NAD							\$0.00
					100				\$0.00
Home #7				\$0.00	\$0.00	\$0.00	\$44,450.00	\$2,950.00	\$41,500.00
Home #8	Wallace Ross		CH CHESTAGE STREET			\$0.00	\$44,450.00	\$1,450.00	\$43,000.00
							411,100.00		\$40,000.00
									\$0.00
									\$0.00
Home #8				\$0.00	\$0.00	\$0.00	\$44,450.00	\$1,450.00	\$43,000.00
Home #9							THE RESERVE OF THE PARTY OF THE		\$0.00
									\$0.00
									\$0.00
									\$0.00
				\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
							TOT REQ TO DTE	\$102,137.50	The second second
		GRAND TOTAL		\$79,087.50	\$79,087.50	\$0.00	\$505,000.00	\$181,225.00	\$323,775.00
	Services Rendered - Begin	nı 9-Mar-	20		Thru Ma	arch 23, 2020			
		\$181,225.00	Plus (+)		\$0.00	Equals (=)	\$181,225.00	(-	
	Cumulative:	Program Expenditures		Matching Ex		-4(/	Total Expenditures		
		- rogram Emportantareo		mutering Ex	penditures		Total Expellultures		
111b 0	F - 1 (-) 1								
erms of the co	ntract agreement or grant: (c) the	by this request have not been received amount requested herein does not exc	from the Federal / seed the total funds	State Government or expending ted by contract: and	ended for such services und (d) the funds are requested	er any other contract agreement	or grant; (b) the amount reques	ted will be expended for allowable co	sts / expenditures under the
	, , , , , , , , , , , , , , , , , , ,		ord the total lands	obligated by contidet, and	(a) the fallas are requested	Tor only initiodate dispersonici	10.		
I Hereby Cer	tify That the goods sold and/or ser	vices rendered have been delivered a	nd/or performed in g	ood order within the time	listed above and are in comp	pliance with all statutory requirer	nents and regulations. I certify t	hat this request does not include any	advances or funds for future
bligations.									
				Ja	mes Curtis Smith				
	Signature of	Authorized Official		Date Signed		Prepare	ed By	-	
							7007		
	Gerald Steen, Preside	ent			60	1-214-5966			
	Typed Name and Title of A	Authorized Official				Preparer's Tel	enhone No	-	

TOTAL DUE

Sunbelt Research and Development Consortium, Inc.

717 Thomas Lane Madison. MS 39110 601-214-5966

Fax: 601-898-3761

SERVICE FOR:

Project Administration

Submitted BY:

INVOICE NUMBER HOME 1606

Source | 1228-M16-SG-280-045

TAX NUMBER 64-0660259

JOB DESCRIPTION Project Administration.]

DATE [03/23/2020]

BILL TO:

Madison County Board of Supervisors Post Office Box 608 Canton, MS 39046

DATE	SERVICE DESCRIPTION	Amount	Rate	AMOUNT
01/27/2020	HOME Project Notice To Proceed			
	Bertha Luckett Matlock			
	Mary Black		;	
	Mary M. Austin			
	Rose Zettera Williams	;		
	Willie Ann Johnson			
į	Paulette Wales	'		i
	Margie Brooks Wallace Ross			
	Wallace 17055			1
	Construction			1
	Bertha Luckett Matlock 33% Complete	1500	1.00	1500.00
	Rose Zettera Williams 100% Complete	2250	1.00	2250.00
	Paulette Wales 100% Complete	1550	1.00	1550.00
			'	
i	İ			
				\$5,300.00

MAKE CHECKS PAYABLE TO:

Sunbelt Research and Development Consortium,

Inc.

KT Constructio P.O. Box 407 Durant, MS. 39063 (662)227-8762

Invoice

Number

3143

Date

3/22/2020

Bill To

Madison County Board of Supervisors 4406 Highway 43 N Canton, MS, 39046

Ship To

Bertha Luckett-Matlock 4406 Highway 43 N Canton, MS, 39046

PO Number	Terms	Project
1228-m16-sg-280-045	33% completion payment	Bertha Luckett-Matlock home

Date	Description	Hours	Rate	Amount	
3/2020	33% completion payment		\$0.00	\$39,600.00	

KAT Construction P.O. BOX 407 Durant, MS 39063 662-227-8762

Amount Paid	\$0.00
Amount Due	\$39,600.00

Discount	\$0.00
Shipping Cost	\$0.00
Sub Total	\$39,600.00

Total \$39,600.00

0 - 30 days	31 - 60 days	61 - 90 days	> 90 days	Total
\$39,600.00	\$0.00	\$0.00	\$0.00	\$39,600.00

APPLICATION AND CERTIF	PROJECT:	AIA DOCUMENT G702 PAGE ONE OF 2 PAGES APPLICATION NO: 2 Distribution to:
Paulette Wales 148 Tithelo Road Canton, MS 39046 FROM CONTRACTOR:	VIA ARCHITECT:	PERIOD TO: 3/20/2020 ARCHITECT CONTRACTOR
Skyline Innovations, Inc. 115 Riley Drive Jackson, MS 39209		PROJECT NOS:
CONTRACT FOR:		CONTRACT DATE:
CONTRACTOR'S APPLICA Application is made for payment, as shown below Continuation Sheet, AIA Document G703, is attac	in connection with the Contract.	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.
1. ORIGINAL CONTRACT SUM 2. Net change by Change Orders 3. CONTRACT SUM TO DATE (Line 1 ± 2) 4. TOTAL COMPLETED & STORED TO DATE (Column G on G703) 5. RETAINAGE: a. % of Completed Work (Column D + E on G703) b. % of Stored Material (Column F on G703) Total Retainage (Lines 5a + 5b or	\$ 37,700.00 \$ 37,700.00 \$ 37,700.00	State of: NS Subscribed and sworn to before me this 30 day of Nath 2020 My Commission expires: My 24 2020 Date: 3:20:20 County of: HTMS day of Nath 2020 KATRINA EVAL Comm. Comm. Comm. Comm. Comm. Comm. Comm. Comm. Comm.
Total in Column I of G703) 6. TOTAL EARNED LESS RETAINAGE (Line 4 Less Line 5 Total) 7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate) 8. CURRENT PAYMENT DUE 9. BALANCE TO FINISH, INCLUDING RETA (Line 3 less Line 6)	\$ 0.00 \$ 37,700.00 \$ 18,850.00 \$ 18,850.00 \$ 0.00	In accordance with the Contract Documents, based on on-site observations and the data comprising the 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\$ 18,850 AMOUNT CERTIFIED
CHANGE ORDER SUMMARY	ADDITIONS DEDUCTIONS	(Attach explanation if amount certified differs from the amount applied. Initial all figures on this
Total changes approved in previous months by Owner		Application and anthe Continuation Sheet that are changed to (conform with the amount certified.) ARCHURET: Physics of the Many States of 23/23/20 By Date: 3/23/20
Total approved this Month TOTALS	\$0.00	This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the
1017113	The state of the s	Contractor named herein. Issuance, payment and acceptance of payment are without
NET CHANGES by Change Order	\$0.00	prejudice to any rights of the Owner or Contractor under this Contract.

NET CHANGES by Change Order

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CONTINUATION SHEET

AIA DOCUMENT G703

2 PAGE OF PAGES

3/20/2020

3/20/2020

2

PROJECT: 148 Tithelo Road

APPLICATION NO:

PERIOD TO:

APPLICATION DATE:

Canton, MS 39046

AIA Document G702, APPLICATION AND CERTIFICATION FOR PAYMENT, containing Contractor's signed certification is attached.

In tabulations below, amounts are stated to the nearest dollar.

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

								Carlon, MS 3904	×
Α	В	C	D	E	F	G	Н		J
ITEM	DESCRIPTION OF WORK	SCHEDULED	WORK COM	IPLETED	MATERIALS	TOTAL	%	BALANCE	RETAINAGE
NO.		VALUE	FROM PREVIOUS	THIS PERIOD	PRESENTLY	COMPLETED	(G + C)	TO FINISH	(IF VARIABLE
			APPLICATION		STORED	AND STORED		(C -G)	RATE)
			(D + E)		(NOT IN	TO DATE			
					D OR E)	(D+E+F)			
									·
1	Install hard wired smoke detectors	\$1,750.00	\$875.00	\$875.00		\$1,750.00	100%	\$0.00	
2	Soffit, Fascia Board; and Wood Board Siding	\$2,450.00	\$1,225.00	\$1,225.00		\$2,450.00	100%	\$0.00	
3	Replace any and all defected light fixtures	\$2,800.00	\$1,400.00	\$1,400.00		\$2,800.00	100%	\$0.00	
4	Flooring: Jack the house up	\$8,900.00	\$4,450.00	\$ 4,450.00		\$8,900.00	100%	\$0.00	
5	Brick Veneer	\$1,000.00	\$500.00	\$500.00		\$1,000.00	100%	\$0,00	
6	Porches, steps, & handicapped ramp	\$3,500.00	\$1,750.00	\$1,750.00		\$3,500.00	100%	\$0.00	
7	Septic system	\$2,200.00	\$1,100.00	\$1,100.00		\$2,200.00	100%	\$0.00	
8	Bathroom: handicapped bars	\$1,850.00	\$925.00	\$925.00		\$1,850.00	100%	\$0.00	
9	Roofing	\$7,200.00	\$3,600.00	\$3,600.00		\$7,200.00	100%	\$0.00	
10	Wash Room	\$850.00	\$425.00	\$425.00		\$850.00	100%	\$0.00	
11	Master Bath	\$850.00	\$425.00	\$425.00		\$850.00	100%	\$0.00	
12	Master Bed Room	\$300.00	\$150.00	\$150.00		\$300.00	100%	\$0.00	
13	Other Bathroom	\$850.00	\$425.00	\$425.00		\$850.00	100%	\$0.00	
14	Bedroom	\$250.00	\$125.00	\$125.00		\$250.00	100%	\$0.00	
15	Ceiling Repair	\$1,850.00	\$925.00	\$ 925.00		\$1,850.00	100%	\$0.00	
16	Carport Asbestos Siding	\$1,100.00	\$550.00	\$550.00		\$1,100.00	100%	\$0.00	
		,							
					<u> </u>				
	GRAND TOTALS	\$37,700.00	\$18,850.00	\$18,850.00	\$0.00	\$37,700.00	100%	\$0.00	
		I							

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APPLICATION AND CERTIFITO OWNER: Zettera Williams	PROJECT:	AIA DOCUMENT G702 PAGE ONE OF 2 PAGES APPLICATION NO: 2 Distribution to:						
147 William Carson Road Canton, MS 39046 FROM CONTRACTOR: Skyline Innovations, Inc.	VIA ARCHITECT:	PERIOD TO: 3/20/2020 ARCHITECT CONTRACTOR						
Skyffie Inflovations, fre. 115 Riley Drive Jackson, MS 39209 CONTRACT FOR:		PROJECT NOS: CONTRACT DATE:						
CONTRACTOR'S APPLICAT Application is made for payment, as shown below, Continuation Sheet, AIA Document G703, is attach	in connection with the Contract.	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.						
1. ORIGINAL CONTRACT SUM 2. Net change by Change Orders 3. CONTRACT SUM TO DATE (Line 1 ± 2) 4. TOTAL COMPLETED & STORED TO DATE (Column G on G703) 5. RETAINAGE: a. % of Completed Work (Column D + E on G703) b. % of Stored Material (Column F on G703) Total Retainage (Lines 5a + 5b or	\$ 30,675.00 \$ 30,675.00 \$ 30,675.00 \$ 30,675.00	State of: MS Subscribed and sworn to before me this 20 Notary Public: Law Waws My Commission expires: MAY 74, 2670 Date: 320-20 County of: H105 day of March 2020 TO # 102447						
Total in Column I of G703) 6. TOTAL EARNED LESS RETAINAGE (Line 4 Less Line 5 Total) 7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate) 8. CURRENT PAYMENT DUE 9. BALANCE TO FINISH, INCLUDING RETAIL (Line 3 less Line 6)	\$ 0.00 \$ 30,675.00 \$ 15,337.50 \$ 15,337.50 NAGE \$ 0.00	ARCHITECT'S CERTIFICATE FOR PAYMENT: In accordance with the Contract Documents, based on on-site observations and the data commission Expires comprising the 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						
CHANGE ORDER SUMMARY Total changes approved in previous months by Owner	ADDITIONS DEDUCTIONS	(Attach explanation if amount certified differs from the amount applied. Initial all figures on this Application and onthe Continuation Speet that are changed to conform with the amount certified.) ARCHIEFET: Project Horman Date: 3/23/20						
Total approved this Month TOTALS	\$0.00	This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the						
NET CHANGES by Change Order	\$0.00	Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.						

Ala DOCUMENT G702 APPLICATION AND CERTIFICATION FOR PAYMENT 1992 EDITION AIA ©1992

THE AMERICAN INSTITUTE OF ARCHITECTS, 1735 NEW YORK AVE., N.W., WASHINGTON, DC 20

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CONTINUATION SHEET

AIA DOCUMENT G703

2 PAGE OF PAGES

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2

AIA Document G702, APPLICATION AND CERTIFICATION FOR PAYMENT, containing

Contractor's signed certification is attached.

In tabulations below, amounts are stated to the nearest dollar.

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

APPLICATION NO: APPLICATION DATE:

3/20/2020 3/20/2020

PERIOD TO: 3/20/2020 PROJECT: 147 William Carson

Canton, MS 39046

— . Т	В	С	D	E	F	G	Н		
A	DESCRIPTION OF WORK	SCHEDULED	WORK COMPLETED		MATERIALS	TOTAL	%	BALANCE	RETAINAGE
ITEM	DESCRIPTION OF THE PROPERTY OF	VALUE	FROM PREVIOUS	THIS PERIOD	PRESENTLY	COMPLETED	(G ← C)	TO FINISH	(IF VARIABLE
NO.		1	APPLICATION		STORED	AND STORED		(C-G)	RATE)
			(D + E)		(not in	TO DATE			1
					D OR E)	(D+E+F)			
	Install 200 amp overhead service meter base	\$1,600.00	\$1,300.00	\$300.00		\$1,600.00	100%	\$0.00	
1	Replacement of electrical receptacle outlets	\$1,750.00	\$875.00	\$875.00		\$1,750.00	100%	\$0,00	
- 1	Bathroom Receptacles	\$1,450.00	\$725.00	\$725.00		\$1,450.00	100%	\$0.00	L
	Kitchen Receptacles	\$875.00	\$437.50	\$437.50		\$875.00	100%	\$0.00	<u> </u>
4	Installation of smoke detectors	\$1,750.00	\$875.00	\$875.00		\$1,750.00	100%	\$0.00	
5	Replacement of defected light fixtures	\$4,200.00	\$1,350.00	\$2,850.00		\$4,200.00	100%	\$0.00	
	Washroom	\$2,450.00	\$1,225,00	\$1,225.00		\$2,450.00	100%	\$0.00	
	Front Bedroom	\$2,250.00	\$1,125.00	\$1,125.00		\$2,250.00	100%	\$0.00	
- 8	Soffit, Fascia Board; and Wood Board Siding	\$4,800.00	\$1,650.00	\$3,150.00		\$4,800.00	100%	\$0.00	
		\$1,850.00	\$925.00	\$925.00		\$1,850.00	100%	\$0.00	
	Window Doors	\$2,150.00	\$1,075.00	\$1,075.00		\$2,150.00	100%	\$0.00	<u> </u>
11	Flooring and floor covering	\$1,500.00	\$750.00	\$750.00		\$1,500.00	100%	\$0.00	
	Living rm and dining room	\$2,750,00		\$375.00		\$2,750.00	100%	\$0.00	
	Kitchen	\$1,300.00		\$650.00		\$1,300.00	100%	\$0,00	
14	Interior Painting	1							
		-							
				1					
		 							
L		 		† · · · · · · · · · · · · · · · · · · ·					
		 							
	GRAND TOTALS	\$30,675.00	\$15,337.50	\$15,337.50	\$0.00	\$30,675.00	100%	\$0.00	
1	GRAND IOIALS	555,575,00						İ	<u> </u>
	The second burses	di a contra lina	L	Dogument D401	Contification of F	ocument's Autho	ntichy	<u> </u>	

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