

## PROJECT INVOICE

**PROJECT:** NAU WWWTF CLARIFIER REHAB  
**VENDOR:** SGS CONTRACTING SERVICES, INC.

**CONTRACT #:** CM2619

**INVOICE #:**

**FINAL**

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Item/Description	Account No.	Contract Value	Work Previously Completed	Work Completed this Invoice	Retainage Withheld	Current Payment Due	Contract Balance	Contract Balance with Retainage
Construction	71500535-563551 WWSC	\$827,600.00	\$763,895.00	\$40,205.00	\$0.00	\$40,205.00	\$23,500.00	\$23,500.00
Retainage Payable					\$0.00	\$40,205.00		
Total(s)		\$827,600.00	\$763,895.00	\$40,205.00	\$0.00	\$40,205.00	\$23,500.00	\$23,500.00

**AMOUNT TO PAY:** \$40,205.00

**BOARD OF COUNTY COMMISSIONERS' STAFF APPROVALS:**

**SIGNATURE**

**DATE**

**Project Manager/NAU Operations Superintendent**

Teresa Irby-Butler

8/24/2021

*I attest that, to the best of my knowledge, the attached invoice reflects accurate quantities of the work in place and that the work was done in substantial conformance with applicable local, State, and/or Federal regulations, permits, and approved construction plans. If applicable, I also attest that, to the best of my knowledge, the attached invoice complies with the associated grant agreement and conditions.*

**County Engineer**

*I certify that, to the best of my knowledge, the attached invoice reflects accurate quantities of the work in place and that the work was done in substantial conformance with applicable local, State, and/or Federal regulations, permits, and approved construction plans. Further, C.E.I., **GAI Consultants**, has verified that the work was performed and notes are on file that indicates the work was performed.*

**Procurement Manager**

[Signature]

8/24/2021

*I attest that, to the best of my knowledge, the attached invoice reflects accurate quantities of the work in place and that the work was done in substantial conformance with applicable local, State, and/or Federal regulations, permits, and approved construction plans. Further, the contracted C.E.I. (if applicable), has verified that the work was performed and notes are on file that indicates the work was performed.*

**Office of Management and Budget**

Megan Diehl

8/24/2021

*I attest that, to the best of my knowledge, funds are available for payment of invoice consistent with the funding plan approved by the Board of County Commissioners.*

**County Manager**

[Signature]

8/24/2021

*I attest that, to the best of my knowledge, the appropriate staff have reviewed and approved payment of this invoice and that no other conditions would prohibit releasing payment. Note: County Manager is not require to sign if invoice is less than \$100,000.00.*

**CLERK OF COURTS:**

**Clerk of Courts Approval**

**Financial Services Action**

**Special Instructions:**

**CHECK#** \_\_\_\_\_

**DATE:** \_\_\_\_\_