

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1622427  
Vendor Name: F.E. Moran Inc. Mechanical Ser  
Invoice Number: 001-185376000  
Invoice Date: 05/17/21  
PO Number: B0373722  
Check Number: E0085341  
Check Amount: \$ 19,045.00  
Check Date: 06/28/2021  
Department ID: 21047  
Reviewer Name: Kathy Striplin  
Voucher Number: V0679723  
Redaction Type: None  
Document Type: AP Invoice

Document Below

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From: Zerrudo, Maria <zerrudom@cod.edu>  
Sent: Mon May 17 16:39:24 CDT 2021  
To: invoicing@cod.edu  
CC:  
Subject: FW: Attached Document  
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**From:** Inman, Donald <inmand1960@cod.edu>  
**Sent:** Monday, May 17, 2021 4:37 PM  
**To:** Zerrudo, Maria <zerrudom@cod.edu>  
**Subject:** RE: Attached Document

Whew, caught you just in the nick of time,

The new invoice was just sent...attached herewith, the amount is



Don

How's things with you Marivic?

Don

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**From:** Zerrudo, Maria <zerrudom@cod.edu>  
**Sent:** Monday, May 17, 2021 4:35 PM  
**To:** Inman, Donald <inmand1960@cod.edu>  
**Subject:** Attached Document

Hi Don,

I processed the invoice earlier for \$17,140.50, I will pull it.

What is the correct amount?

Thanks

**Marivic Zerrudo**  
**Accounts Payable Team Leader**  
**College of DuPage**

425 Fawell Blvd | SRC 2132 | Glen Ellyn, IL 60137-6599  
phone 630-942-2601 | [zerrudom@cod.edu](mailto:zerrudom@cod.edu)

[attachment: 85376 may pay app - revised.pdf]

PO373722

**\$ 19,045.00**

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# APPLICATION AND CERTIFICATE FOR PAYMENT

Page 1 of 2 Pages

TO OWNER: COLLEGE OF DUPAGE  
425 FAWELL BLVD  
GLEN ELLYN, IL 60137

PROJECT: COD BIC/SRC GENERATOR SILENCER  
425 FAWELL BLVD  
GLEN ELLYN, IL 60137

APPLICATION NO: 1  
PERIOD TO: 5/31/2021  
PROJECT NOS: PO373722

Distribution to:  
☐ OWNER  
☐ ARCHITECT  
☐ CONTRACTOR  
☐  
☐

FROM CONTRACTOR: F.E. MORAN, INC.  
2265 CARLSON DRIVE  
NORTHBROOK, IL 60062

VIA ARCHITECT:

CONTRACT DATE:  
INVOICE NUMBER: 001-185376000  
JOB ID: 185376000

CONTRACT FOR: HVAC

## CONTRACTOR'S APPLICATION FOR PAYMENT

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

1. ORIGINAL CONTRACT SUM ..... \$ 207,900.00
2. Net change by Change Orders ..... \$ 0.00
3. CONTRACT SUM TO DATE (Line 1 + 2) ..... \$ 207,900.00
4. TOTAL COMPLETED & STORED TO DATE ..... \$ 19,045.00  
(Column G on Detail Sheets)
5. RETAINAGE  
a. 0.00 % of Completed Work ..... \$ 0.00  
(Columns D + E on Detail Page)  
b. 0.00 % of Stored Material ..... \$ 0.00  
(Column F on Detail Page)  
Total Retainage (Line 5a + 5b or  
Total in Column I of Detail Page) ..... \$ 0.00
6. TOTAL EARNED LESS RETAINAGE ..... \$ 19,045.00  
(Line 4 less Line 5 Total)
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT  
(Line 6 from prior Certificate) ..... \$ 0.00
8. CURRENT PAYMENT DUE ..... \$ 19,045.00
9. BALANCE TO FINISH, INCLUDING RETAINAGE  
(Line 3 less Line 6) ..... \$ 188,855.00

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
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
NET CHANGES by Change Order		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 no other payment shall be made hereon.

CONTRACTOR: F.E. MORAN, INC.

By: \_\_\_\_\_

Date: \_\_\_\_\_

State of: \_\_\_\_\_

County of: \_\_\_\_\_

Subscribed and sworn to before  
me this \_\_\_\_\_ day of \_\_\_\_\_

Notary Public: \_\_\_\_\_

My Commission expires: \_\_\_\_\_

## 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 ..... \$ 19,045.00

(Attach explanation if the 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.

**CONTINUATION SHEET**

## APPLICATION AND CERTIFICATE FOR PAYMENT

containing Contractor's signed Certification, is attached.

Use Column 1 on Contracts where variable retainage for line items may apply.

(Version 11.2.2)

APPLICATION NO: 1

APPLICATION DATE: 5/17/2021

PERIOD TO: 5/31/2021

ARCHITECT'S PROJECT NO: PO373722

INVOICE NUMBER: 001-185376000

JOB ID: 185376000

[illegible]