

Pay Estimate Form

Project Name:	Mason Rd (17405)		
Project Number:	17405		
PO Number:	188060		
Contractor:	Allgood Construction		
Pay Estimate Number:	5 [Final Pay Estimate]		
Date of Estimate:	CreatedOn 10/07/2020 LastModifiedOn 10/12/2020		
Estimate Dates:	From 08/15/2020 To 10/07/2020		
Contract Dates:	04/06/2020 To 11/02/2020		

	Total
Original Contract Time	210 Days
Extensions by Change Orders	0 Days
Total Contract Time	210 Days
Spent Days	185 Days
Days Remaining	25 Days

	Up to Previous	Current	Total	
1. Original Contract Amount		\$ 1,226,755.44		
2. Net Change by Change Orders		-\$ 42,137.85		
3. Total Contract Amount	\$ 1,184,617.59			
4. Total Earnings	\$ 1,184,617.59	\$ 0.00	\$ 1,184,617.59	
5. Total Work Completed (%)	100.00%	0.00%	100.00%	
6. Material on Hand (Payment)	\$ 0.00	\$ 0.00	\$ 0.00	
7. Material on Hand (Recovery)	\$ 0.00	\$ 0.00	\$ 0.00	
8. Total Earnings before Retainage (4+6-7)	\$ 1,184,617.59	\$ 0.00	\$ 1,184,617.59	
9. Retainage at 0.00% of (8)	\$ 0.00	\$ 0.00	\$ 0.00	
10. Retainage Release	\$ 56,461.44	\$ 59,230.88	\$ 115,692.33	
11. Net After Retainage (8-9+10)	\$ 1,241,079.03	\$ 59,230.88	\$ 1,300,309.92	
12. Adjustments (Liquidated Damages)	\$ 0.00	\$ 0.00	\$ 0.00	
13.Payment Due (11-12)		\$ 59,230.88		

AGENDA

PAY ESTIMATE: #05-Final

PROJECT: Mason Road, From North Limit of Fieldstone Subdivision to Beechnut St

JOB # 17405

CONTRACTOR'S AFFIDAVIT AND RELEASE

STATE OF TEXAS
COUNTY OF FORT BEND

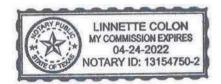
For and in consideration of the sum of \$59,230.89 , representing payment under the above referenced contract for all labor, materials and/or services furnished by the undersigned for the Mason Road, from North Limit of Fieldstone Subdivision to Beechnut St in Fort Bend County, Texas, and represented by payment request dated October 9, 2020 covering all such work from 08/15/2020 to 10/07/2020 less retention upto that date, undersigned hereby certifies that all labor and materials prior to the above date by undersigned in connection with the above named project have been paid in full. The undersigned agrees to indemnify and save harmless Fort Bend County against all loss, damage or expense of any character whatsoever that may arise by reason of claims for labor or unpaid materials used in connection with said improvements, prior to the above date. The undersigned further hereby releases and waives any and all liens or lien-rights against all real property owned by Fort Bend County in Fort Bend County, Texas, arising out of work performed or materials furnished for or in connection with construction of said project.

ALLGOOD CONSTRUCTION COMPANY, INCORPORATED

STATE OF TEXAS
COUNTY OF FORT BEND

Sterling Moore/President

This Instrument was acknowledged before me on October 9, 2020, by Sterling Moore, President of Allgood Construction Company, Incorporated, a Texas Corporation, on behalf of said corporation. Sworn to and subscribed before me, a notary public on this the 9th day of October, 2020.



Notary Public for the State of Texas My Commission Expires: 04-24-2020

Lennette Colon

CONSENT OF SURETY COMPANY TO FINAL PAYMENT Conforms with the American Institute of Architects, AIA Document G707	Bond No.		OWNER ARCHITECT CONTRACTOR SURETY OTHER			
TO OWNER:		ARCHITECT'S PROJ	ECT NO:			
(Name, address)		CONTRACT FOR:				
Fort Bend County		CONTRACT FOR:				
PROJECT		CONTRACT DATE:				
Construction of Mason Road from North Limit o	of Fieldstone Subdiv	vision to Beechnut Street f	or Fort Bend County	Bond		
In accordance with the provisions of the Contra (Insert name and address of Surety)	act between the Ow	ner and the Contractor as	indicated above, the	;		
Travelers Casualty and Surety Company of Ame	rica					
One Tower Square						
Hartford, Connecticut 06183						
on bond of (Insert name and address of Contractor) Allgood Construction Co., Inc.			, SURETY CO	JMPANY,		
			, CONTRACT	OR,		
hereby approves of the final payment to the Co the Surety Company of any of its obligations to (Insert name and address of Owner) Fort Bend County		s that final payment to the	Contractor shall not			
			,	OWNER.		
as set forth in the said Surety Company's bond						
IN WITNESS, WHEREOF, the Surety has here	eunto set its hand o	n this date:				
October 2, 2020	Travelers Casua	lty and Surety Company	of America			
Michele Bondurant, Account Manager Attest:	Surety Company	Ley f brown	5			
(Seal):	Signature of Aut	horized Representative				
	Kelly J. Brooks, A	Attorney-in-Fact				
NOTE: This form is be used as a companion document to AIA D Current Edition	OCUMENT G706, CONT	TRACTOR'S AFFIDAVIT OF PAY	MENT OF DEBTS AND C	CLAIMS,		

S-2134/GEEF 7/98 ONE PAGE



Travelers Casualty and Surety Company of America Travelers Casualty and Surety Company St. Paul Fire and Marine Insurance Company

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company are corporations duly organized under the laws of the State of Connecticut (herein collectively called the "Companies"), and that the Companies do hereby make, constitute and appoint Kelly J. Brooks, of Cypress, Texas, their true and lawful Attorney-in-Fact to sign, execute, seal and acknowledge any and all bonds, recognizances, conditional undertakings and other writings obligatory in the nature thereof on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

IN WITNESS WHEREOF, the Companies have caused this instrument to be signed, and their corporate seals to be hereto affixed, this 3rd day of February, 2017.







State of Connecticut

City of Hartford ss.

Robert L. Raney, Serror Vice President

On this the 3rd day of February, 2017, before me personally appeared Robert L. Raney, who acknowledged himself to be the Senior Vice President of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, and that he, as such, being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as a duly authorized officer.

in Witness Whereof, I hereunto set my hand and official seal.

My Commission expires the 30th day of June, 2021



Marie C. Tetreault, Notary Public

This Power of Attorney is granted under and by the authority of the following resolutions adopted by the Boards of Directors of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, which resolutions are now in full force and effect, reading as follows:

RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President, any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary may appoint Attorneys-in-Fact and Agents to act for and on behalf of the Company and may give such appointee such authority as his or her certificate of authority may prescribe to sign with the Company's name and seal with the Company's seal bonds, recognizances, contracts of indemnity, and other writings obligatory in the nature of a bond, recognizance, or conditional undertaking, and any of said officers or the Board of Directors at any time may remove any such appointee and revoke the power given him or her; and it is

FURTHER RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President may delegate all or any part of the foregoing authority to one or more officers or employees of this Company, provided that each such delegation is in writing and a copy thereof is filed in the office of the Secretary; and it is

FURTHER RESOLVED, that any bond, recognizance, contract of indemnity, or writing obligatory in the nature of a bond, recognizance, or conditional undertaking shall be valid and binding upon the Company when (a) signed by the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary and duly attested and sealed with the Company's seal by a Secretary or Assistant Secretary; or (b) duly executed (under seal, if required) by one or more Attorneys-in-Fact and Agents pursuant to the power prescribed in his or her certificate or their certificates of authority or by one or more Company officers pursuant to a written delegation of authority; and it is

FURTHER RESOLVED, that the signature of each of the following officers: President, any Executive Vice President, any Senior Vice President, any Senior Vice President, any Secretary, and the seal of the Company may be affixed by facsimile to any Power of Attorney or to any certificate relating thereto appointing Resident Vice Presidents, Resident Assistant Secretaries or Attorneys-in-Fact for purposes only of executing and attesting bonds and undertakings and other writings obligatory in the nature thereof, and any such Power of Attorney or certificate bearing such facsimile signature or facsimile seal shall be valid and binding upon the Company and any such power so executed and certified by such facsimile signature and facsimile seal shall be valid and binding on the Company in the future with respect to any bond or understanding to which it is attached.

I, Kevin E. Hughes, the undersigned, Assistant Secretary of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, do hereby certify that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which remains in full force and effect.

Dated this

HARTFORD, S COMPANY CO

Kevin E. Hughes, Assistant Secretary

To verify the authenticity of this Power of Attorney, please call us at 1-800-421-3880.

Please refer to the above-named Attorney-in-Fact and the details of the bond to which the power is attached.



IMPORTANT NOTICE

TO OBTAIN INFORMATION OR MAKE A COMPLAINT:

You may contact Travelers Casualty & Surety Company of America, Travelers Casualty & Surety Company, Travelers Indemnity Company, Standard Fire Insurance Company and/or Farmington Casualty Company for information or to make a complaint at:

Travelers Bond Attn: Claims 1500 Market Street West Tower, Suite 2900 Philadelphia, PA 19102

(267) 675-3000 (267) 675-3102 Fax

You may contact the Texas Department of Insurance to obtain the information on companies, coverages, rights or complaints at:

Texas Department of Insurance P.O. Box 149104 Austin, TX 78714-9104

(800) 252-3439

ATTACH THIS NOTICE TO YOUR BOND. This notice is for information only and does not become a part or a condition of the attached document and is given to comply with Section 2253-021, Government Code, and Section 53.202, Property Code, effective September 1, 2001.