

Pay Estimate Form

Project Name:	Old Richmond Road (17208)
Project Number:	17208
PO Number:	192549
Contractor:	Allgood Construction
Pay Estimate Number:	CN-1/PA 19/17208 [Final Pay Estimate]
Date of Estimate:	CreatedOn 12/01/2022 LastModifiedOn 01/17/2023
Estimate Dates:	From 06/01/2022 To 12/01/2022
Contract Dates:	10/19/2020 To 03/03/2022

	Total
Original Contract Time	390 Days
Extensions by Change Orders	111 Days
Total Contract Time	501 Days
Spent Days	501 Days
Days Remaining	0 Days

	Up to Previous	Current	Total
1. Original Contract Amount			\$ 3,278,586.91
2. Net Change by Change Orders			\$ 233,203.31
3. Total Contract Amount			\$ 3,511,790.22
4. Total Earnings	\$ 3,492,227.21	\$ 19,563.00	\$ 3,511,790.21 L
5. Total Work Completed (%)	99.44%	0.56%	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)	\$ 3,492,227.21	\$ 19,563.00	\$ 3,511,790.21
9. Retainage at 0.00% of (8)	\$ 342,152.08	\$ 0.00	\$ 342,152.08
10. Retainage Release	\$ 167,540.72	\$ 174,611.36	\$ 342,152.08
11. Net After Retainage (8-9+10)	\$ 3,317,615.85	\$ 194,174.36	\$ 3,511,790.21
12. Adjustments & Liquidated Damages	\$ 0.00	\$ 0.00	\$ 0.00
13.Payment Due (11+12)		\$ 194,174.36	A

LAWSON

AGENDA

PAY ESTIMATE #19-Final PROJECT: OLD RICHMOND ROAD JOB # 17208 CONTRACTOR'S AFFIDAVIT AND RELEASE

STATE OF TEXAS COUNTY OF FORT BEND

For and in consideration of the sum	n of \$194,174.36	, representing	payment under the above referenced
contract for all labor, materials and/or			CONSTRUCTION OF OLD RICHMOND
	일이 하는 것이 살아보다 하는 것이 없는 사람들이 없는 것이 없다.	내려워 전 왕 긁혀 없었다. 사고리 중 사고를 했다.	ND COUNTY BOND PROJECT 17208
in Fort Bend County, Texas, and rep	resented by payment req	uest dated	December 1, 2022
covering all such work from	6/1/2022 to	12/1/2022	less retention upto that date,
- MANTON TANDER	all labor and materials pr	ior to the above da	te by undersigned in connection with the
	나는 사람들이 가는 사람들이 가는 것이 되었다. 그런 사람들은 사람들은 사람들이 되었다. 그리는 사람들은 사람들이 다른다.		fy and save harmless FORT BEND COUNTY
			e by reason of claims for labor or unpaid
			The undersigned further hereby releases
			y FORT BEND COUNTY in FORT BEND
COUNTY, Texas, arising out of work	performed or materials f	urnished for or in co	onnection with construction of said project.
	ALLGOOD CONSTR	OCTION COMPANY	, INCORPORATED
		(10)	
	By:		
STATE OF TEXAS	Sterling Moore/President	ent	
COUNTY OF FORT BEND			
	owledged before me on	December 1, 2022	, By Sterling Moore, President
			on behalf of said corporation.
Sworn to and subscribed	d before me, a notary publi	ic on this the 1st	Day of December ,2022
		Lenne	He Colon
LI	NNETTE COLON	Notary Public	for the State of Texas
1 101	otary ID # 131547502	(1915 - Francis) - 17 - 171	on Expires: 04-24-2026
EXI	pires April 24, 2026		

	A D CHUTE CTUC DD C IE C
of Architects, AIA Document G707	
Conforms with the American Institute	
TO FINAL PAYMENT	
SURETY COMPANY	
CONSENT OF	Bond No.

OWNER	
ARCHITECT	
CONTRACTOR	
SURETY	\boxtimes
OTHER	

TO FINAL PAYMENT	CONTRA SURETY		
Conforms with the American Institute of Architects, AIA Document G707	OTHER		
TO OWNER:	ARCHITECT'S PROJECT NO:		
(Name, address)			
Fort Bend County	CONTRACT FOR:		
PROJECT	CONTRACT DATE:		
In accordance with the provisions of the Cont (Insert name and address of Surety)	ract between the Owner and the Contractor as indicated a	bove, the	
Travelers Casualty and Surety Company of Ar	nerica		
One Tower Square			
Hartford, Connecticut 06183			
200.00000000000000000000000000000000000	, SUF	RETY COM	IPANY
on bond of			
(Insert name and address of Contractor)			
Allgood Construction Co., Inc.			
1702 Settegast Road			

Richmond, Texas 77406

, CONTRACTOR,

hereby approves of the final payment to the Contractor, and agrees that final payment to the Contractor shall not relieve the Surety Company of any of its obligations to (Insert name and address of Owner) Fort Bend County

, OWNER.

ONE PAGE

as set forth in the said Surety Company's bond.

IN WITNESS, WHEREOF, the Surety has hereunto set its hand on this date:

Attest:

(Seal):

December 2, 2022

Travelers Casualty and Surety Company of America

Surety Company

Signature of Authorized Representative

Kelly J. Brooks, Attorney-in-Fact

Title

NOTE: This form is be used as a companion document to AIA DOCUMENT G706, CONTRACTOR'S AFFIDAVIT OF PAYMENT OF DEBTS AND CLAIMS, Current Edition

S-2134/GEEF 7/98



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.

By. Robert L. Raney, Seffor 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







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.