TOPO Monthly Invoice Verification Form

Please Return this Form to Meiling Lincoff (SFD-2) **by: FRIDAY, 07/01/16**

Date Monthly Progress Report and Invoice Distributed to TOPO: 06/21/16

Contractor: CB&I Federal Services LLC	Contractor No.: EP-S9-13-02
TO No.: 018-RSBD-09GU	Site Name: Anaconda Copper
Invoice No: **26**	**Contract PO: Maria Velez**
Amount Billed: $2,817.90	**TOPO: David Seter**

Period of Performance: 05/01/16 - 05/31/16

Voucher Overview also including Reviewing Summary of Costs by Task: Please mark Y (Yes), or N (No), or NA and provide written explanations when answers are "no."

___Y___1. Are specific costs correctly broken down, accumulated, and billed?
___Y___2. Does the invoice period of performance (PoP) cover the progress report PoP?
___Y___3. Are the billed costs authorized by the task order workplan?
___Y___4. Is the math accurate?
___Y___5. Are the accumulated costs and level of effort invoiced within the estimates of the approved workplan?

Labor

___Y___ 6. Is the labor mix consistent with the workplan?
___Y___ 7. Are the labor hours commensurate with work completed in PoP?
___Y___ 8. Are the labor categories similar to the last PoP?
___NA__ 9. If not, is there an appropriate rationale for the change?
___NA_ 10. Were billed premiums for overtime authorized by the CO or allowable in the contract?

Other Direct Costs

__NA__11. Was CO's consent for any charges for subcontractors received in advance?
__NA__12. Is the level of subcontract effort charged commensurate with the level of progress made?
__NA__13. Do travel expenses appear reasonable and within the approved budget?
__NA__14. Do supply and material costs appear appropriate for the tasks completed this month?
__NA__15. Did equipment purchase have prior CO approval as required by property procedures?
__NA__16. If present, does the amount of ALL other direct costs seem reasonable and commensurate with the work performed?

Please check one of the statements below and provide verification signature. Keep the invoice and monthly report for your record. **If there is any unreasonable and/or confusing information, please send your request for explanation/clarification through an email to the contractor and always include Maria Velez, Monika O'Sullivan and Meiling Lincoff in the "cc."**

___√___ I agree with this invoice. Sufficient progress has been made by the contractor to support payment of the work performed.

_____ Contractor must provide additional justification for verification of costs and/or hours on this task order.

_____ Cost listed below should be withheld since they cannot be verified.

Comments/Explanation:

Mandatory TOPO Monthly Performance Evaluation Form

Please rate each criterion and provide positive feedback or problem areas that need to be addressed.
The minimum acceptable rating is "Good." The rating below "Good" or any problem areas indicated below should be addressed immediately by Project Officer and contractor Program Manager.

5 – Outstanding 4 – Excellent 3 – Good 2 – Fair 1 – Poor 0 - Unsatisfactory

Quality of Services Delivered Rating: __3_____

There was only minor activity under this task order for this reporting period, including contractor follow-up on OU7 field observations and split sample date and preparation for upcoming OU4 field oversight. The monthly planning call and the summary of the work submitted with the invoice were of good quality as were the general services described above.

Effectiveness of Management Rating: ___3_____

The contractor continued to perform a good job at organizing regular conference calls and other communications and has continued to provide levels of documentation that enable TOPOs to effectively review invoices.

Initiative in Meeting Contract Requirement Rating: __3_____

The contractor has done a good job at fulfilling contract requirements, submitting sufficiently detailed progress reports in support of invoices and supplementing this information as necessary at the request of the TOPOs. Burn rate has been lower than contractor's work plan budget estimates.

Timeliness of Performance Rating: __3_____

Contractor reports progress made on OU7field oversight reports during this period, which adequately addresses delivery concerns expressed in previous monthly report.

Cost Control Rating: ___3____

Burn rate has been lower than contractor's work plan budget estimates, although those initial estimates appeared on the high side to the TOPO. Contractor has been good at consulting with the TOPOs with respect to the minimum contractor staff needed to assist on conference calls, etc.

Business Practices Rating: ___3_____

The contractor has continued to be responsive to TOPOs previous requests for more detailed information on progress reports. Burn rates are lower than budget estimates. A rating of "good" is warranted in recognition of the fact that the contractor has been responsive in addressing errors/delays but has experienced some errors/delays.

Customer Satisfaction Rating ____3____

The contractor continues to perform good to excellent level work on a highly complex project with multiple stakeholders. A rating of "good" is assigned for this review period because EPA still awaits submittal of field oversight reports, although an explanation for the delay has been provided.

Signature & Date: 6/24/16 6/27/16

Dante Rodriguez

I have reviewed the monthly progress and financial reports and verify to the best of my ability the costs incurred.