Michigan Department
of Transportation
1371CASA (02/2001)

AERONAUTICS PAY ESTIMATE REPORT

CONTRACT I.D. AND AIRPORT	CONTRACTOR	ESTIMATE DATE Page _____ of _____	FOR WORK PERFORMED ON OR BEFORE (MM/DD/YY)

REC. TYPE	PROJECT	VOUCHER NO.	VOUCHER DATE	VOUCHER TYPE	CONSTRUCTION START DATE
1					

WORK ITEM USAGE

1	19 - 22	23 - 26	27 - 30	31 - 33	34 - 37	38 - 50	
REC. TYPE	**CATEGORY NUMBER**	**PROJECT LINE NO.**	**ITEM TYPE**	**CONTRACT MOD. NO.**	**STOCKPILE TYPE**	**QUANTITY**	
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MBE/MBE

☐ IN COMPLIANCE ☐ NON-COMPLIANCE ☐ NOT APPLICABLE

PAYROLL

☐ CURRENT ☐ NOT CURRENT ☐ NOT APPLICABLE

I certify that the items included on this report constitute my estimate of work completed and due the contractor as of the date of this document.

SIGNATURE, SPONSOR'S ENGINEER	DATE	CONSULTANT
EXAMINED BY		
BUREAU OF AERONAUTICS-APPROVED FOR PAYMENT AIRPORTS DIVISION	DATE	

Clear Form