

DEPARTMENT OF CITYWIDE ADMINISTRATIVE SERVICES**Payment Routing/Certification Records****Part I: Payment Data**[] FMC [☒] DRES [] OEC

1. Contract # 98F2654 CP # 37836 Capisid # PW 3261346
2. Project Name/Description OEM, 7 World Trade Center
3. RE/PM Name Glenn Pymonte Telephone # 669-8094
4. Contractor/Consultant/Vendor _____
5. Contract Type (Check all that apply) [☒] Capital [] Expense [] Construction [] Lump Sum
[] Unit Price [] Requirements [] CM Build/Design Build [] Open Market Order
[] Consultant [] Other (please state) _____
6. Payment # 7 Amount Due \$ 504,232.00 Pay Per. _____ To _____
7. Payment Type (Check all that apply) [] Partial [☒] Change Order [] Task/Work Order
[] Substantial [☒] Final [] Retainage [] Bond Substance [] Article 17
[] Other (please state) _____

Part II : Processing Dates

1. In From Contractor 6/14/01 RE/PM In 6/14/01 RE/PM Sign Off 6/14/01
2. Budget In Date _____ Budget Out Date _____ Budget Rejection Date _____
3. Reason for Budget Rejection _____
4. FMC/DRES/OEC Out Date _____ FMC/DRES/OEC Rejection Date _____
5. Reason for FMC/DRES/OEC Rejection _____
6. EAO In Date _____ EAO Out Date _____ EAO Rejection Date _____
7. EAO's Reason for Rejection _____
8. Audit In Date _____ Audit Out Date _____ Audit's Rejection Date _____
9. Audit's Reason for Rejection _____

Part III: Required Signatures/Approvals

1. RE/PM Signoff Glenn Pymonte [Signature] 6/14/01
(DCAS Employees Only) Print Name Signature Date
2. Budget Reviewer _____
Print Name Signature Date
3. EAO Auditor _____
Print Name Signature Date
4. Audit's Auditor _____
Print Name Signature Date