NYC 9/11 Public Portal Document

EXHIBIT "A"

7 WORLD TRADE COMPANY, L.P.
C/O SILVERSTEIN PROPERTIES, INC.
521 Fifth Avenue
New York, New York 10175

August 30, 1999

ASSISTANT COMMISSIONER FOR LEASING
AND SPACE DESIGN
Department of Citywide Administrative Services
Division of Real Estate Services
1 Centre Street - 20th Floor North
New York, New York 10007

RE: **7 WORLD TRADE CENTER**
NEW YORK, NEW YORK
MAYOR'S OFFICE OF EMERGENCY MANAGEMENT

INVOICE

Pursuant to the Letter Agreement dated August 30, 1999 and related Lease (as previously modified) specified therein.

AMOUNT DUE - $1,884,322.00

7 WORLD TRADE COMPANY, L.P.
By: Silverstein Properties, Inc., Agent

By:_____
Catherine T. Giliberti
Senior Vice President

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DEPARTMENT OF CITYWIDE ADMINISTRATIVE SERVICES

Payment Routing/Certification Records

Part I: Payment Data

[ ] FMC [✓] DRES [ ] OEC

1. Contract # 98F2654 CP # 37836 Capisid # PN326 1346
2. Project Name/Description OEM, 7 WORLD TRADE CENTER
3. RE/PM Name RICHARD RAMOS Telephone # 669-8086
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 .# 4 Amount Due $ 1,884,322.00 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 8/30/99 RE/PM In 8/31/99 RE/PM Sign Off 8/31/99
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

	Print Name	Signature	Date
1. RE/PM Signoff (DCAS Employees Only)	RICHARD RAMOS		8/31/99
2. Budget Reviewer			
3. EAO Auditor			
4. Audit's Auditor			