

Willis

Willis of New York, Inc.
P.O. Box 4557
Church Street Station
New York, NY 10261-4557
(212) 344-8888

INVOICE

INVOICE DATE
21-AUG-2002

INVOICE NO.
0858320

NEW YORK CITY DEPARTMENT OF DESIGN & CONSTRUCTION
30-30 THOMSON AVENUE
LONG ISL CITY NY 11101

DUE DATE

31-AUG-2002

ACCOUNT	LOCATION	ACCOUNT NAME
496964	001	New York City Department of Design & Construction

FOR QUESTIONS REGARDING THIS INVOICE, PLEASE CALL ONE OF THE FOLLOWING

SERVICER

Lauren S. Saverino

PRODUCER

Lauren S. Saverino

REF	BILLING INFORMATION	AMOUNT
01	Transaction: Account Service Eff. Date : 20-NOV-2001 Service : MISCLFEE Description: ATC - IH MONITORING Period : 20-NOV-2001 to 03-MAY-2002 In Full : November 2001 ATC - IH MONITORING ATC OVERSIGHT Total for Reference 01 \$ 1,160,423.62 ATC - IH MONITORING #09270145 11/20/01-12/14/01 \$227,542.90 #00309014 12/21/01-01/11/02 \$194,433.52 #00309014 01/12/02-02/15/02 \$234,461.39 #00309014 02/15/02-03/15/02 \$202,568.57 #00322751 03/16/02-04/12/02 \$191,321.74 #00336503 04/13/02-05/03/02 \$ 92,095.50 ATC OVERSIGHT 1 MONTH = \$6,000 X 3 MONTHS = \$18,000	\$ 1,142,423.62 \$ 18,000.00
SERVICING COPY - DO NOT MAIL		AMOUNT DUE ➡ \$ 1,160,423.62

Subsidiaries of Willis North America Inc. are members of a major international group of companies. In addition to the commissions received by us from insurers for placement of your insurance coverages, other parties, such as excess and surplus lines brokers, wholesale brokers, reinsurance intermediaries, underwriting managers and similar parties (some of which may be owned in whole or in part by our corporate parents or affiliates), may earn and retain usual and customary commissions for their role in providing insurance products or services to you under their separate contracts with insurers or reinsurers. Additionally, it is possible that we, or our corporate parents or affiliates, may receive contingent payments or allowances from insurers based on factors which are not client-specific, such as the size or performance of an overall book of business produced with an insurer by us, our corporate parents or affiliates. Upon written request, we will provide information regarding the compensation received by us or by our corporate parents or affiliates.

Helmsman Management Services, Inc.®
Re: ADDITIONAL EXPENSE TO BE BILLED

DATE: March 28, 2002

FORM SHOULD BE COMPLETED AND RETURNED TO CONTRACT ADMINISTRATOR IN H.O. HELMSMAN MANAGEMENT

Account Name		City of New York Department of Design and Construction	
Billing Contact Name (Mr./Ms.)		Frank McIntyre	Billing Contact Title
Complete Account Address		City of New York Department of Design and Construction c/o Willis of New York 7 Hanover Square New York, NY 10004-2594	
Helmsman Contract Number		WP8-62B-004607-391 92/2 (Vendor LP)	
LP Rep		Various	Office New York
Billable Service Time			
Date	Visit Time in Hours		
11/20/2001 - 12/14/2001	See Below for details		
Brief Description of Service Provided:			
Monitoring and Equipment Fees and Expenses			
Straight Time Monitoring Services	Hours/Units	Rate	Actual Expenses
Technician	1015	\$60.00	\$60,900.00
Senior Project Manager	327.3	\$85.00	\$27,820.50
Certified Industrial Hygienist	252.5	\$125.00	\$31,562.50
Account Manager	169	\$115.00	\$19,435.00
Industrial Hygienist	8	\$75.00	\$600.00
Over Time Monitoring Services			\$0.00
Technician	1125.2	\$72.00	\$81,014.40
Industrial Hygienist	4.5	\$90.00	\$405.00
Equipment Fees & Expenses			\$0.00
Low Volume Sampling Pumps	321	\$5.00	\$1,605.00
Datalogging CO Monitors	88	\$5.00	\$440.00
CO Badges	6	\$11.25	\$67.50
Direct Reading Instrumentation	25	\$125.00	\$3,125.00
FedEx Shipping Charges	12	\$14.00	\$168.00
Office Supplies	1	\$175.00	\$175.00
Office Fixtures	1	\$225.00	\$225.00
TOTAL AMOUNT TO BE INVOICED:			\$227,542.90

HMS 8.R1 Additional Expense to be Billed

P. 04/28

6037497510 TO 12127854624

AUG 15 2002 15:07 FR LIBERTY MUTUAL

Helmsman Management Services, Inc.®
Re: ADDITIONAL EXPENSE TO BE BILLED

DATE: May 30, 2002

FORM SHOULD BE COMPLETED AND RETURNED TO CONTRACT ADMINISTRATOR IN H.Q. HELMSMAN MANAGEMENT

Account Name	City of New York Department of Design and Construction		
Billing Contact Name (Mr./Ms.)	Frank McIntyre	Billing Contact Title	
Complete Account Address	City of New York Department of Design and Construction c/o Willis of New York 7 Hanover Square New York, NY 10004-2594		
Helmsman Contract Number	WP8-62B-004607-391 92/2 (Vendor LP)		
LP Rep	Various	Office	New York
Billable Service Time			
Date	Visit Time in Hours		
12/21/2001 - 1/11/2002	See Below for details		
Brief Description of Service Provided:			
Monitoring and Equipment Fees and Expenses			
Straight Time Monitoring Services	Hours/Units	Rate	Actual Expenses
Technician	839	\$60.00	\$50,340.00
Senior Project Manager	112	\$85.00	\$9,520.00
Certified Industrial Hygienist	93.5	\$125.00	\$11,687.50
Account Manager	111.5	\$115.00	\$12,822.50
Industrial Hygienist	0	\$75.00	\$0.00
Over Time Monitoring Services			\$0.00
Technician	900	\$72.00	\$64,800.00
Industrial Hygienist	0	\$90.00	\$0.00
Senior Project Manager	167	\$85.00	\$14,195.00
Certified Industrial Hygienist	121.5	\$125.00	\$15,187.50
Account Manager	95	\$115.00	\$10,925.00
Equipment Fees & Expenses			\$0.00
Low Volume Sampling Pumps	278	\$5.00	\$1,390.00
Datalogging CO Monitors	69	\$5.00	\$345.00
CO Badges	0	\$11.25	\$0.00
Direct Reading Instrumentation	0	\$125.00	\$0.00
FedEx Shipping Charges	0	\$14.00	\$0.00
Office Supplies	0	\$175.00	\$0.00
Equipment	1	\$3,221.02	\$3,221.02
TOTAL AMOUNT TO BE INVOICED:			\$194,433.52

HMS 8.R1 Additional Expense to be Billed

P.13/28

6037497510 TO 12127854624

AUG 15 2002 15:09 FR LIBERTY MUTUAL

Helmsman Management Services, Inc.®
Re: ADDITIONAL EXPENSE TO BE BILLED

DATE: May 30, 2002

FORM SHOULD BE COMPLETED AND RETURNED TO CONTRACT ADMINISTRATOR IN H.O. HELMSMAN MANAGEMENT

Account Name	City of New York Department of Design and Construction		
Billing Contact Name (Mr./Ms.)	Frank McIntyre	Billing Contact Title	
Complete Account Address	City of New York Department of Design and Construction c/o Willis of New York 7 Hanover Square New York, NY 10004-2594		
Helmsman Contract Number	WPS-62B-004607-391 92/2 (Vendor LP)		
LP Rep	Various	Office	New York
Billable Service Time			
Date	Visit Time in Hours		
1/12/2002 - 2/15/2002	See Below for details		
Brief Description of Service Provided:			
Monitoring and Equipment Fees and Expenses			
Straight Time Monitoring Services	Hours/Units	Rate	Actual Expenses
Technician	1154	\$60.00	\$69,240.00
Senior Project Manager	200	\$85.00	\$17,000.00
Certified Industrial Hygienist	112	\$125.00	\$14,000.00
Account Manager	136	\$115.00	\$15,640.00
Industrial Hygienist	0	\$75.00	\$0.00
Over Time Monitoring Services			\$0.00
Technician	937.25	\$72.00	\$67,482.00
Industrial Hygienist	0	\$90.00	\$0.00
Senior Project Manager	230	\$85.00	\$19,550.00
Certified Industrial Hygienist	144.5	\$125.00	\$18,062.50
Account Manager	87.5	\$115.00	\$10,062.50
Equipment Fees & Expenses			\$0.00
Low Volume Sampling Pumps	374	\$5.00	\$1,870.00
Datalogging CO Monitors	88	\$5.00	\$440.00
PLM Sample Analysis	6	\$15.00	\$90.00
Direct Reading Instrumentation	0	\$125.00	\$0.00
FedEx Shipping Charges	0	\$14.00	\$0.00
Office Supplies	0	\$175.00	\$0.00
Equipment	1	\$1,024.39	\$1,024.39
TOTAL AMOUNT TO BE INVOICED:			\$234,461.39

HMS 8.R1 Additional Expense to be Billed

P. 12/28 6037497510 TO 12127854624

AUG 15 2002 15:09 FR LIBERTY MUTUAL

Helmsman Management Services, Inc.®
Re: ADDITIONAL EXPENSE TO BE BILLED

DATE: May 30, 2002

FORM SHOULD BE COMPLETED AND RETURNED TO CONTRACT ADMINISTRATOR IN H.O. HELMSMAN MANAGEMENT

Account Name		City of New York Department of Design and Construction	
Billing Contact Name (Mr./Ms.)		Frank McIntyre	Billing Contact Title
Complete Account Address		City of New York Department of Design and Construction c/o Willis of New York 7 Hanover Square New York, NY 10004-2594	
Helmsman Contract Number		WP8-62B-004607-391 92/2 (Vendor LP)	
LP Rep		Various	Office New York
Billable Service Time			
Date	Visit Time in Hours		
2/15/2002 - 3/15/2002	See Below for details		
Brief Description of Service Provided:			
Monitoring and Equipment Fees and Expenses			
Straight Time Monitoring Services		Hours/Units	Rate
Technician		1008	\$60.00
Senior Project Manager		160	\$85.00
Certified Industrial Hygienist		113.5	\$125.00
Account Manager		85	\$115.00
Industrial Hygienist		0	\$75.00
Over Time Monitoring Services			\$0.00
Technician		900.5	\$72.00
Industrial Hygienist		0	\$90.00
Senior Project Manager		182.5	\$85.00
Certified Industrial Hygienist		88.5	\$125.00
Account Manager		49	\$115.00
Equipment Fees & Expenses			\$0.00
Low Volume Sampling Pumps		384	\$5.00
Datalogging CO Monitors		119	\$5.00
Paint Chip Sampling Analysis		9	\$25.00
Direct Reading Instrumentation		0	\$125.00
FedEx Shipping Charges		0	\$14.00
Office Supplies		0	\$175.00
Equipment		1	\$4,740.07
TOTAL AMOUNT TO BE INVOICED:			\$202,568.57

HMS 8.R1 Additional Expense to be Billed

82/11/28 6037497510 TO 12127854624 AUG 15 2002 15:09 FR LIBERTY MUTUAL

CONFIDENTIAL INSURANCE INFORMATION.
 SUBJECT TO PROTECTIVE ORDER NO. 2, SEPT. 2008

CITY_21MC100_013508390

NYC-WTC_000177372

Helmsman Management Services, Inc.®
Re: ADDITIONAL EXPENSE TO BE BILLED

DATE: July 23, 2002

FORM SHOULD BE COMPLETED AND RETURNED TO CONTRACT ADMINISTRATOR IN H.O. HELMSMAN MANAGEMENT

Account Name		City of New York Department of Design and Construction	
Billing Contact Name (Mr./Ms.)		Frank McIntyre	Billing Contact Title
Complete Account Address		City of New York Department of Design and Construction c/o Willis of New York 7 Hanover Square New York, NY 10004-2594	
Helmsman Contract Number		WP8-62B-004607-391 92/2 (Vendor LP)	
LP Rep		Various	Office New York
Billable Service Time			
Date	Visit Time in Hours		
3/16/2002 - 4/12/2002	See Below for details		
Brief Description of Service Provided:			
Performed Environmental/Occupational Sampling Support Services for WTC Disaster Response			
Straight Time Monitoring Services	Hours/Units	Rate	Actual Expenses
Technician	944	\$60.00	\$56,640.00
Senior Project Manager	326	\$85.00	\$27,710.00
Certified Industrial Hygienist	186	\$125.00	\$23,250.00
Account Manager	191	\$115.00	\$21,965.00
Industrial Hygienist	0	\$75.00	\$0.00
Over Time Monitoring Services			\$0.00
Technician	792	\$72.00	\$57,024.00
Industrial Hygienist	0	\$90.00	\$0.00
Senior Project Manager	0	\$85.00	\$0.00
Certified Industrial Hygienist	0	\$125.00	\$0.00
Account Manager	0	\$115.00	\$0.00
Equipment Fees & Expenses			\$0.00
Low Volume Sampling Pumps	420	\$5.00	\$2,100.00
Datalogging CO Monitors	110	\$5.00	\$550.00
Equipment Rental			\$831.60
Project Expenses - Other			\$58.85
Supplies - General Field Lab			\$225.25
Repairs and Maintenance			\$967.04
TOTAL AMOUNT TO BE INVOICED:			\$191,321.74

HMS 8.R1 Additional Expense to be Billed

P.25/28

6037497510 TO 12127854624

AUG 15 2002 15:12 FR LIBERTY MUTUAL

*** TOTAL PAGE 04 ***

Helmsman Management Services, Inc.®
Re: ADDITIONAL EXPENSE TO BE BILLED

DATE: August 14, 2002

FORM SHOULD BE COMPLETED AND RETURNED TO CONTRACT ADMINISTRATOR IN H.O. HELMSMAN MANAGEMENT

Account Name		City of New York Department of Design and Construction	
Billing Contact Name (Mr./Ms.)		Frank McIntyre	
Billing Contact Title			
Complete Account Address		City of New York Department of Design and Construction c/o Willis of New York 7 Hanover Square New York, NY 10004-2594	
Helmsman Contract Number		WP8-62B-004607-391 92/2 (Vendor LP)	
LP Rep	Various	Office	New York
Billable Service Time			
Date	Visit Time in Hours		
4/13/2002 - 5/3/2002	See Below for details		
Brief Description of Service Provided:			
Performed Environmental/Occupational Sampling Support Services for WTC Disaster Response			
Straight Time Monitoring Services	Hours/Units	Rate	Actual Expenses
Technician	472	\$60.00	\$28,320.00
Senior Project Manager	206	\$85.00	\$17,510.00
Certified Industrial Hygienist	137.5	\$125.00	\$17,187.50
Account Manager	74	\$115.00	\$8,510.00
Industrial Hygienist	0	\$75.00	\$0.00
Over Time Monitoring Services			\$0.00
Technician	269	\$72.00	\$19,368.00
Industrial Hygienist	0	\$90.00	\$0.00
Senior Project Manager	0	\$85.00	\$0.00
Certified Industrial Hygienist	0	\$125.00	\$0.00
Account Manager	0	\$115.00	\$0.00
Equipment Fees & Expenses			\$0.00
Low Volume Sampling Pumps	189	\$5.00	\$945.00
Datalogging CO Monitors	51	\$5.00	\$255.00
Equipment Rental			
Project Expenses - Other			
Supplies - General, Field, Lab			
Repairs and Maintenance			
TOTAL AMOUNT TO BE INVOICED:			\$92,095.50

HMS 8.R1 Additional Expense to be Billed

P.04

6032497510 TO 12127854624

AUG 20 2002 08:44 FR LIBERTY MUTUAL

CONFIDENTIAL INSURANCE INFORMATION,
SUBJECT TO PROTECTIVE ORDER NO. 2, SEPT. 2008

CITY_21MC100_013508392

NYC-WTC_000177374