Form to be printed on letter size (8 1/2 x 11) white paper.

STATE OF HAWAII

DEPARTMENT NO. _____

UNREQUIRED CONTRACT ENCUMBRANCE ADVICE

COMPTROLLER'S NO. _____

DATE _____

TO: COMPTROLLER STATE OF HAWAII
ATTN: DAGS ACCOUNTING DIVISION

FROM: _____ CONTRACT NO. _____ CONTRACTOR _____

1. The total contract amount encumbered for this contract is to be reduced by the unrequired amount of $ _____
   Detailed data, as appropriate, are recorded below.

2. The total amount paid the contractor is $ _____

3. Explain reason for unrequired contract encumbrances:

   ☐ Final Payment (for listed SFX only)
   ☐ Over-encumbered (explain) _____
   ☐ Final Payment (contract completed)
   ☐ Other (explain) _____

_____

HEAD OF DEPARTMENT: _____
(SIGNATURE)

SFX	PROJECT NUMBER	TYPE OF FUND	APPROPRIATION	CONTRACT AMOUNT	TOTAL AMOUNT PAID	UNREQUIRED ENCUMBRANCES		
						TOTAL	FEDERAL FUNDS	STATE FUNDS