Attachment J – Monthly Compliance Report  Hawaii Department of Transportation Monthly Compliance Report	
Project Name:	
Project No:	
Reporting Month and Year:	
Complete this form within 2 working days of the estimate and made available by the end of the next bus applicable boxes below and include attachments	siness day when requested by DOH. Check the
Corrective Action Reports for this month are a	attached.
$\square$ Changes to the information on file with DOH.	for the past month are attached.
$\square$ No changes, updates, or any incidences of nor	n-compliance to report.
I certify under penalty of law that this document of direction or supervision in accordance with a systeroperly gather and evaluate the information subpersons who manage the system, or those persons information, the information submitted is, to the land complete. I am aware that there are signification including the possibility of fine and imprisonment	tem designed to assure that qualified personnel mitted. Based on my inquiry of the person or directly responsible for gathering the best of my knowledge and belief, true, accurate, and penalties for submitting false information,
Signature:	Date:
Person Name: <u>Mike Medeiros</u>	
Person Position Title: <u>Oahu District Engineer</u>	
Person Company or Agency: <u>Department of Tran</u>	nsportation, Highways Division
Department: <u>Department of Transportation, Hi</u> g	hways Division
Division: <u>Department of Transportation, Highwa</u>	ys Division
Phone Number: <u>(808) 831-6700 Ext. 128</u>	Fax No.: <u>(808) 831-6725</u>
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