Exhibit 1 to Attachment B for RFP P-327

Agreement Between Owner and Design Professional Services, Part A
ARCHITECT'S STATEMENT FOR SERVICES

Architect's Name and Address or Letterhead
(Federal employer's identification number on each copy)

TO: Business
Office
Owner (Local Owner)

ADDRESS (As Listed on Contract)
PROJECT:

DATE:

Purchase Order #_________________

Purchase Order Revision #_________________

Statement for Architectural Services Rendered as Follows: ____%

1. Basic Fee: ______%

Contract total Amount per P.O. $_________________

<table>
<thead>
<tr>
<th>Service</th>
<th>% 10</th>
<th>% 50</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service A</td>
<td>10%</td>
<td>50%</td>
<td>$00.00</td>
</tr>
<tr>
<td>Service B</td>
<td>15%</td>
<td>50%</td>
<td>$00.00</td>
</tr>
<tr>
<td>Service C</td>
<td>50%</td>
<td>50%</td>
<td>$00.00</td>
</tr>
<tr>
<td>Service D</td>
<td>5%</td>
<td>50%</td>
<td>$00.00</td>
</tr>
<tr>
<td>Service E</td>
<td>20%</td>
<td>50%</td>
<td>$00.00</td>
</tr>
</tbody>
</table>

Total Basic Fee Earned to Date $0.00

2. Other Fees Per special services Provisions of the Agreement:
(Fully account for other fees here or in an attachment)

Amount included in previous billings 0
Increase for this billing per P.O Revision 0
Total Incurred to Date 0
3. Reimbursable Expenses:
(Fully account of Reimbursable Expenses here or in an attachment)
Amount included in previous billings 0
Increase for this billing 0
Total Reimbursable Expenses Incurred to Date 0.00

4. Total Amount Earned To Date $00.00
5. Less Previous Payments $00.00
6. Amount Due This Invoice $00.00
7. Tax (Albuquerque tax) (Alb Tax) _____% N/A
8. Albuquerque Total with Tax $0.00
9. Tax (Bernalillo tax) (Bern) _____% $00.00
10. Bernalillo Total with Tax $00.00

I certify that the above is correct, just and that payment therefore has not yet been received.

By (title) Date