

# STATEMENT OF COMPLIANCE

Date:

I, \_\_\_\_\_ do hereby certify under penalty of perjury:  
 (Name of signatory party) (Title)

(1) That all the information in this report is true and correct;  
 (2) That I pay or supervise the payment of the persons reported as employed by \_\_\_\_\_  
 on the \_\_\_\_\_, that during the payroll period commencing on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_  
 (Project)  
 and ending the \_\_\_\_ day of \_\_\_\_\_, 201\_\_, all persons employed on said project have been paid their full weekly wages  
 earned, that no rebates have or will be made either directly or indirectly to or on behalf of said  
 \_\_\_\_\_ from the full weekly wages earned by any person and that no deductions have been  
 (Contractor or Subcontractor)  
 made either directly or indirectly from the full wages earned by any person, other than permissible deductions, as described below:

(3) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wages contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he or she performed.

(4) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency.

(5) That :

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS OR PROGRAMS

X  In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payment of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 5 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

\_\_\_\_\_ Each laborer or mechanic listed in the above referenced payroll has been paid as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract except as noted in Section 5 (c) below:

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION
Remarks:	
Payroll #	
Name and Title	Signature
Jillian Elliott – Human Recourse/Payroll Clerk	