



Prime Contractor

Subcontractor

CERTIFIED PAYROLL REPORT

Project Name Stable Work 2904	County	Project or Contract# PR001
Project Address 123 Construction Way	City Olympia	State WA
Company Name Points North (CPW Sample Reports)	Phone 775 111 1111	
Address 371 Canal Park Dr	City Olympia	State WA
		ZIP+4 98501-7904

For the week ending: Month Day Year May 5 2012	Awarding Agency Name		Phone	
	Address	City	State	ZIP+4

Work Classification and Soc Sec# of Employee	Name and Address	Overtime or Regular	Day and Date							Total Hours	Rate of Pay	Gross Amount Earned	Total Hourly "Usual Benefits"	Deductions			NET WAGES		
			Sun	Mon	Tue	Wed	Thu	Fri	Sat					FICA	Withhold-ing Tax	Other			
			4/29	4/30	5/1	5/2	5/3	5/4	5/5										
Hours Worked Each Day																			
1. Laborer XXX-XX-9999	Hiko, Lee 120 Jones St Springfield, IL 62701	OT	0	0	0	0	0	0	0	0	0	0.00	0.00	\$880.00	\$25.00	\$12.00	\$150.00	\$14.00	\$704.00
		RG	0	8	8	8	8	8	8	0	40	22.00	880.00						
2. Operator XXX-XX-2222	Lew, Matt 84 Amburst Rd Springfield, IL 62701	OT	0	0	0	0	0	0	0	0	0	44.00	0.00	\$1188.00	\$25.00	\$21.00	\$202.00	\$23.00	\$942.00
		RG	0	8	8	8	8	8	8	0	40	22.00	880.00						
3. Electrician XXX-XX-3333	Ritz, Jes 41 Cattail Lane Springfield, IL 62701	OT	0	0	0	0	0	0	0	0	0	0.00	0.00	\$1000.00	\$65.00	\$20.00	\$221.00	\$0.00	\$759.00
		RG	0	4	0	0	0	0	0	0	4	20.00	80.00						
4. Laborer XXX-XX-4444	Wacki, Bill 10 Wards Rd Springfield, IL 62701	OT	0	0	0	0	0	0	0	0	0	0.00	0.00	\$160.00	\$25.00	\$2.00	\$25.00	\$0.00	\$133.00
		RG	0	8	2	0	0	0	0	0	10	16.00	160.00						
5.		OT																	
		RG																	
6.		OT																	
		RG																	
7.		OT																	
		RG																	
8.		OT																	
		RG																	
9.		OT																	
		RG																	
10.		OT																	
		RG																	

AFFIRMATION

Today's Date 5/9/2012	Printed name of party signing this report John Smith	Title Owner
The party signing this report pays or supervises the (Name of contractor or subcontractor) payment of the persons employed by: Points North (CPW Sample Reports)		
Project Name: Stable Work 2904	For the week starting: 4/29/2012	For the week ending: 5/5/2012

“USUAL BENEFITS” DISTRIBUTION (Please report in “per hour” terms)

Work Classification	Total Hourly “Usual Benefits” (A + B + C + D + E)	(A) Hourly Pension	(B) Hourly Medical	(C) Hourly Vacation	(D) Hourly Holiday	(E) Approved Apprentice Program
1. Laborer	\$25.00	\$5.00	\$5.00	\$5.00	\$5.00	\$5.00
2. Operator	\$25.00	\$5.00	\$5.00	\$5.00	\$5.00	\$5.00
3. Electrician	\$65.00	\$30.00	\$20.00	\$5.00	\$5.00	\$5.00
4. Laborer	\$25.00	\$5.00	\$5.00	\$5.00	\$5.00	\$5.00
5.						
6.						
7.						
8.						
9.						
10.						

The party signing below **AFFIRMS** the following:

- (1) All information contained in this Certified Payroll Report, including any addenda, is correct and complete.
- (2) The wage rates for workers, laborers or mechanics as reported above are not less than the applicable wage rates contained in any wage determination related to the contract; and the classifications as reported above for each worker, laborer or mechanic conform with the actual work performed by such worker, laborer or mechanic.
- (3) The payments of usual benefits as listed above have been or will be made to appropriate approved plans, funds or programs for the benefit of such employees.
- (4) All persons employed on the above-referenced project(s) have been paid the full weekly wages earned, and no rebates have been or will be made either directly or indirectly to or on behalf of the above-named contractor or subcontractor from the weekly wages earned by any person. No deductions, other than those which are legally permissible, have been made by any person either directly or indirectly from the full wages earned.
- (5) Any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with the Washington State Apprenticeship and Training Council.

Falsification of any of the above statements is a violation of RCW 39.12.050 subject to prosecution, sanctions, and penalties.

Print or type name of party signing this report John Smith	Title Owner	Signature
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