

PRIME CONTRACTOR SUBCONTRACTOR

Business Name (DBA): ABC Contractors		Phone: (555) 555-5555	CCB Registration Number: 7200A
Project Name: Sample project for demonstration only		Project Number: 54-67-89	Type of Work: Type of work
Street Address: 210 Lakeview Road		Project Location: Project location	
Mailing Address: Sometown, PA 99999		Project County: Project County	
Date Pay Period Began: 06/24/2007		Date Pay Period Ended: 06/30/2007	

<p>THIS SECTION FOR PRIME CONTRACTORS ONLY</p> <p>Public Contracting Agency Name: Phone: Date Contract Specifications First Advertised for Bid: Contract Amount: \$0.00</p>	<p>THIS SECTION FOR SUBCONTRACTORS ONLY</p> <p>Subcontract Amount: Prime Contractor Business Name (DBA): Prime Contractor Phone: Prime Contractor's CCB Registration Number: Date you began Work on the Project:</p>
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(1)	(2)		(3) DAY AND DATE							(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	
			06/24	06/25	06/26	06/27	06/28	06/29	06/30									
			Su	Mo	Tu	We	Th	Fr	Sa									
HOURS WORKED EACH DAY																		
Jane Doe 71 Pineapple Lane Sometown, OR 99999	Pipe Fitter	OT	0	0	0	0	0	0	0	0	27.00	0.00	432.00	FICA	33.05	324.87	1.00	H&W
		S	0	8	8	8	0	0	0	24	18.00			720.00	FED		60.43	1.50
John Doe P.O. Box 999 Sometown, OR 99999	Sheetmetal Worker	OT	0	0	0	0	0	0	0	0	30.00	0.00	480.00	FICA	36.72	355.68	1.00	H&W
		S	0	8	8	8	0	0	0	24	20.00			800.00	FED		72.43	1.50
John Q. Public 2300 Arena Avenue Sometown, OR 99999	Truck Driver	OT	0	0	0	0	0	0	0	0	33.00	0.00	528.00	FICA	40.39	426.20	1.00	H&W
		S	0	8	8	8	0	0	0	24	22.00			880.00	FED		44.73	1.50
John Smith 36 Mimosa Lane Sometown, OR 99999	Laborer	OT	0	0	0	0	0	0	0	0	21.00	0.00	336.00	FICA	25.70	264.07	1.00	H&W
		S	0	8	8	8	0	0	0	24	14.00			560.00	FED		35.62	1.50
		OT												FICA				
		S													FED			
		OT												FICA				
		S													FED			

* Although this form has not been officially approved by the US. Department of Labor, it is designed to meet the requirements of both the state PWR law and the federal Davis-Bacon Act.

** Social Security Number is required only for Davis-Bacon projects.

CERTIFIED STATEMENT

Date 07/03/2007
 I, Cory Smith, President
 (NAME OF SIGNATORY PARTY) (TITLE)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by
ABC Contractors
 (CONTRACTOR, SUBCONTRACTOR OR SURETY)

on the Building or Work; that during the payroll period
 (BUILDING OR WORK)

commencing on the 24 day of June, 2007, and ending the 30 day
 (MONTH) (YEAR)

of June, 2007, all persons employed on said project have been paid the
 (MONTH) (YEAR)

full weekly wages earned, that no rebates have been or will be made either directly or indirectly
 to or on behalf of said ABC Contractors from the
 (CONTRACTOR, SUBCONTRACTOR OR SURETY)

full weekly wages earned by any person and that no deductions have been made either directly
 or indirectly from the full wages earned by any person, other than permissible deductions as
 specified in ORS 625.610, and as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by
 the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat.
 Stat. 967, 76 Stat. 357; 40 U.S.C. 276c), and described below.

This is a sample project for demonstration purposes only

(2) 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 wage rates 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 performed.

(3) That any apprentices employed in the above period are registered with the
 Bureau of Apprenticeship and Training, United States Department of Labor.

I HAVE READ THIS CERTIFIED STATEMENT; KNOW THE CONTENTS THEREOF AND IT IS
 TRUE TO MY KNOWLEDGE.

Cory Smith President
 (NAME AND TITLE)

(SIGNATURE AND DATE)

In addition to completing (1) - (3), if your project is subject to the federal Davis-Bacon Act requirements, complete the following section as well:

(4) That:

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

In addition to the basic hourly wage rates paid to each laborer or mechanic listed
 in the above referenced payroll, payments of fringe benefits as listed in the
 contract have been or will be made to the appropriate programs for the benefit
 of such employees, except as noted in Section 4(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 4(c) below

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION
Enter exceptions here	Enter explanations here
Enter exceptions here	Enter explanations here
Enter exceptions here	Enter explanations here
Enter exceptions here	Enter explanations here

REMARKS

Enter permissible deductions here

NAME AND TITLE

Cory Smith
President

SIGNATURE

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT
 THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION.
 SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED
 STATES CODE.

FILE THIS FORM WITH THE CONTRACTING AGENCY

**NOTE TO CONTRACTORS: YOU MUST ATTACH COPIES OF THIS FORM TO EACH OF YOUR PAYROLL SUBMISSIONS ON THIS PROJECT.
 INSTRUCTIONS AND ADDITIONAL FORMS ARE AVAILABLE ON OUR WEBSITE: WWW.OREGON.GOV/BOLI**