



California  
Department of  
Industrial Relations

## PUBLIC WORKS PAYROLL REPORTING FORM

Page 1 of 1

NAME OF CONTRACTOR: <b>Sample Company</b>		CONTRACTORS LICENSE NO.: <b>1000023456</b>		ADDRESS: <b>55 Lakeview Drive Sometown, US 55555-5555</b>																			
OR SUBCONTRACTOR:		SPECIALTY LICENSE NO.: <b>123456</b>																					
PAYROLL NO: <b>1</b>		FOR WEEK ENDING: <b>09/21/2018</b>		SELF-INSURED CERTIFICATE NO.: <b>78901234</b>		PROJECT OR CONTRACT NO: <b>22354</b>																	
				WORKERS COMPENSATION POLICY NO.: <b>cv-gfh46793125</b>		PROJECT AND LOCATION: <b>Sample Project 1 - Sample project for demonstration only 2500 Canyon Drive Anywhere, US 55555-5555</b>																	
(1) NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	(2) # EX	(3) WORK CLASSIFICATION	Sa 09/15	Su 09/16	Mo 09/17	Tu 09/18	We 09/19	Th 09/20	Fr 09/21	TOTAL HOURS	HOURLY RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS, CONTRIBUTIONS, AND PAYMENTS					(9) NET WGS PAID FOR WEEK	CHECK NO.				
Jane Doe 71 Pineapple Lane Similartown, US 12345 P:530-555-6521 S:xxx-xx- 5555	0	Heavy Highway Labor	S	0	0	8	8	8	8	40	31.00	THIS PROJECT	ALL PROJECTS	FEDERAL TAX	FICA (SOC.SEC.)	STATE TAX	LOCAL TAX	OTHER TAX	OTHER* DED	TOTAL DED	852.23	6241	
			O	0	0	0	0	0	0	0	0	44.00	1240.00	1240.00	179.06	94.86	61.85	0.00	0.00	52.00			387.77
Johnny Doe PO Box 111 Sometown, US 95545 P:530-555-6931 S:xxx-xx- 4444	2	Laborer	S	0	0	8	0	8	0	8	24	25.00	THIS PROJECT	ALL PROJECTS	FEDERAL TAX	FICA (SOC.SEC.)	STATE TAX	LOCAL TAX	OTHER TAX	OTHER* DED	TOTAL DED	799.52	6242
			O	0	0	0	0	0	0	0	0	37.50	600.00	1048.00	72.63	80.17	32.17	10.48	0.63	52.40	248.48		
Susan Anthony 711 Patriot Way Similartown, US 95545 P:530-555-0711 S:xxx-xx- 5435	4	Truck Driver	S	0	0	8	8	8	8	40	25.00	THIS PROJECT	ALL PROJECTS	FEDERAL TAX	FICA (SOC.SEC.)	STATE TAX	LOCAL TAX	OTHER TAX	OTHER* DED	TOTAL DED	804.47	6243	
			O	0	0	0	0	0	0	0	0	37.50	1000.00	1000.00	41.71	76.50	27.32	0.00	0.00	50.00			195.53
Tom Jones 36 Mimosa Lane Sometown, US 95545 P:530-555-7412 S:xxx-xx- 2323	2	Heavy Equipment Operator	S	0	0	8	8	8	8	40	28.00	THIS PROJECT	ALL PROJECTS	FEDERAL TAX	FICA (SOC.SEC.)	STATE TAX	LOCAL TAX	OTHER TAX	OTHER* DED	TOTAL DED	842.28	6244	
			O	0	0	0	0	0	0	0	0	42.00	1120.00	1120.00	81.27	85.68	68.73	8.44	0.00	33.60			277.72
			S								THIS PROJECT	ALL PROJECTS	FEDERAL TAX	FICA (SOC.SEC.)	STATE TAX	LOCAL TAX	OTHER TAX	OTHER* DED	TOTAL DED				
			O																				

**NOTICE TO PUBLIC ENTITY**

**For Privacy Considerations**

**Fold back along dotted line prior to copying for release to general public (private persons).**

I, John Smith, the undersigned, am the  
(Name – print)

President with the authority to act for and on behalf of  
(Position in Business)

Sample Company (Name of business and/or contractor) , certify under penalty of perjury

that the records or copies thereof submitted and consisting of \_\_\_\_\_  
(Description, Number of Pages)

are the originals or true, full, and correct copies of the originals which depict the payroll record(s) of the actual disbursements by way of cash, check, or whatever form to the individual or individuals named.

Date: 09/24/2018 Signature: John Smith

A public entity may require a more strict and/or more extensive form of certification.