

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor <input checked="" type="checkbox"/> or Subcontractor <input type="checkbox"/> ABC Contractors				Address 210 Lakeview Road Sometown, NY 99999												EIN # 55-5555555										
Payroll No. 1		For Week Ending 07/08/2012		Project & Location: Sample project for demonstration only												PA Contract Number: 54-67-89										
1	2	3	4	5							6	7	8	9	10	11	12	13	14	15	16	17	18			
Employee's Name, Address, and SS. No. (last 4 digits)	List Trade & Circle Work Classification (Journeyman or Apprentice/ Class 1,2,3)	SWAC or TWIC ID # If issued	T I M E 07/02 07/03 07/04 07/05 07/06 07/07 07/08	Day and Date							Total Hrs	Base Hourly Rate of Pay	Total Base Pay	Supplemental Benefits			Hourly Rate	TO (Circle)	Total Paid	Gross Amt Earned	Taxable Gross Wages	FICA	Withholding Tax	Other	Total Deductions	Net
				Mo	Tu	We	Th	Fr	Sa	Su				TO	Total Paid											
Jane Doe 71 Pineapple Lane Sometown, NY 99999 xxx-xx-9999	J A1 A2 A3+	Batch# 99999-a	RT 0 8 8 8 0 0 0	OT 0 0 0 0 0 0 0	ST 0 0 0 0 0 0 0	24	18.00	432.00	10.50	<input type="checkbox"/> #999 E O	252.00	432.00	720.00	40.68	95.38	38.88	207.44	512.56								
John Doe P.O. Box 999 Sometown, NY 99999 xxx-xx-9999	J A1 A2 A3+	Batch# 99999-b	RT 0 8 8 8 0 0 0	OT 0 0 0 0 0 0 0	ST 0 0 0 0 0 0 0	24	20.00	480.00	10.50	<input type="checkbox"/> #999 E O	252.00	480.00	800.00	45.20	115.38	43.20	241.76	558.24								
John Q. Public 2300 Arena Avenue Sometown, NY 99999 xxx-xx-9999	J A1 A2 A3+	Batch# 99999-c	RT 0 8 8 8 0 0 0	OT 0 0 0 0 0 0 0	ST 0 0 0 0 0 0 0	24	22.00	528.00	10.50	<input type="checkbox"/> #999 E O	252.00	528.00	880.00	49.72	71.52	47.52	208.92	671.08								
John Smith 36 Mimosa Lane Sometown, NY 99999 xxx-xx-9999	J A1 A2 A3+	Batch# 99999-d	RT 0 8 8 8 0 0 0	OT 0 0 0 0 0 0 0	ST 0 0 0 0 0 0 0	24	14.00	336.00	10.50	<input type="checkbox"/> #999 E O	252.00	336.00	560.00	31.64	59.10	30.24	141.20	418.80								
	J A1 A2 A3+		RT	OT	ST					U E O																
	J A1 A2 A3+		RT	OT	ST					U E O																
Key:													Sworn to before me, this day													
RT- Regular Time OT- Overtime ST- Shift Time																										
U- Union E- Employee O- Other																										
J- Journeyman A- Apprentice																										

NOTE:

- All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
- Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
- Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

I, Cory Smith certify that the information on both sides of this form

represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Cory Smith
Print Name Officer/Designee Signature 07/10/2012
Date Signature of Notary Public

Statement of Compliance

I do hereby state:

1. That I, Cory Smith (Name of Signatory), President (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by ABC Contractors (Name of Contractor), and that all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of ABC Contractors (Name of Contractor) from the full weekly wages earned by any person, other than permissible deductions, including, but not limited to: Federal Withholding, FICA, Medicare, State Withholding, State Disability Insurance, Union Deductions, Child Support or Other Garnishments.

2. That any payrolls otherwise under this contract required to be submitted for the subject 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 and that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program.

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)

Enter exceptions here

EXPLANATION

Enter explanations here

Enter exceptions here

Enter explanations here