



**Illinois Department
of Transportation**

Payroll

<input type="checkbox"/> Contractor or <input checked="" type="checkbox"/> Subcontractor & No. Sample Company Address 55 Lakeview Drive Sometown, US 55555												Route US95			Section OB1			Payroll No. 1									
												County Best County			Project No. 324256			For Week Ending 11/03/2019									
												Sample Project 1 - Sample project for demonstration only 2500 Canyon Drive Anywhere, US 55555						Contract No. 12321/SP678									
(1) Name and Individual Identification Number	(2)* Employee Type	(3)* Employee Name	(4)	St or OT	(5) Hours and Days Worked							(6) Total Hours	(7) Rate of Pay	(8) Amount Earned	(9) Total Earned	(10) Deductions				(11) Wages Paid for Week							
					10/28	10/29	10/30	10/31	11/01	11/02	11/03					Mo	Tu	We	Th		Fr	Sa	Su	Federal WH Tax	FICA	State WH Tax	Other
					Jane Doe xxx-xx-5511	N	Foreman	J	S	8	8					8	8	0	0		40	50.00	2450.00	2450.00	494.25	205.02	102.48
Johnny Doe xxx-xx-4444	W	Laborer	A	S	8	0	8	0	8	0	0	24	30.00	810.00	1380.00	130.91	105.57	42.37	0.00	292.65	1087.35 # 1124						
Susan Anthony xxx-xx-7435	W	Truck Driver	J	S	8	8	4	4	8	0	0	32	40.00	1280.00	1840.00	147.34	140.76	71.43	0.00	359.53	1480.47 # 1122						
Tom Jones xxx-xx-2323	M	Heavy Equipment Operator	J	S	0	0	4	4	8	8	8	32	40.00	1280.00	1840.00	166.72	140.76	73.26	0.00	380.74	1459.26 # 1121						
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Reviewed by: _____

Signature of State Official

No Work Suspended Completed

NOTE: A certified copy of each weekly payroll must be submitted by the prime contractor within seven (7) days of the regular payment date.

* See instruction page for codes to be entered

Date 11/06/2019

I, John Smith, President
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Sample Company (Contractor or Subcontractor) on the Sample project for demonstration only (Building or Work)

; that during the payroll period commencing on October 28, 2019,

and ending on November 03, 2019, 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 said

Sample Company
(Contractor or Subcontractor)

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 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. 967; 76 Stat. 357; 40 U.S.C. 3145), and described below:

Enter deductions here

(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.

(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 any exceptions here	Enter any explanations here
Enter any exceptions here	Enter any explanations here
Enter any exceptions here	Enter any explanations here
Enter any exceptions here	Enter any explanations here

NAME AND TITLE John Smith President	SIGNATURE 
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