## ILLINOIS DEPARTMENT OF LABOR

## **Certified Transcript of Payroll**

IDOL Case File Number: ILDOL#/DOT Section

Payroll Date: 10/7/2000

\*\*\*\*\* Please Note: The submission of falsified paryoll records is a criminal offense. \*\*\*\*\*

Contractor and/or Subcontractor		Contract Information	Public Body Information	: Body Information
Contact Person:	Nancy Smyth, CQA	Contract Number: Contract #	Contact Person: Contact	rson: Contact
Company Name:	Illinois Certified Payroll	Project Number: Fed Proj State Proj	Public Body Name: Illinois Awarding Authority	me: Illinois Awarding Authority
Address:	1234 Any Street	Project: 07-176	Address: 121 Some Street	ress: 121 Some Street
City, State, Zip:	Chicago, IL 55512	Project Location: Federal Project, 07-176	City, State, Zip: Some City, IL 55512	, Zip: Some City, IL 55512
Telephone Number:	888-348-2877		Telephone Number: 800-555-1212	nber: 800-555-1212

Report Hours for Each Day, Including Overtime Hours, List Hourly Prevailing Wage Rate and Hourly Fringe Benefits Allotments.

Employee Name, Address, SSN & Telephone	Labor Classificatio n			Hours Worked Each Day Total Hrs Total OT Hourly OT Wage										Per Pay	Period	Hourly Fringe Benefit				
				10/1	10/2	10/3	10/4	10/5	10/6	10/7		Hours	Wage Rate	Rate	Gross	Net	Pension	Health & Welfare	Vac	Training
Eight I Employee 123 anywhere street anythown, None	Foreperson	PW	ST OT DT	0	8	8	8	0	0	0	24		\$ 20.75		\$ 498.00	\$ 374.57	\$2.20F	\$3.34F	\$1.00F	\$0.71F
123-45-6789		N						8	8	8	16	8	\$ 20.75	\$ 31.13	\$ 581.04	\$ 442.32	2.2	3.34	1	0.71
Eleven C Employee 156 No Street Anytown, None 59932	Foreperson	PW	ST OT DT	0	8	8	8	0	0	0	24		\$ 18.75		\$ 450.00	\$ 152.51	\$2.20E	\$3.34E	\$1.00E	\$0.71E
666-55-4444		N						8	8	6	16	6	\$ 18.75	\$ 28.13	\$ 468.78	\$ 519.18	0	0	0	0
Nine A Employee 123 that street notown, None	Laborer- Apprentice 80%	PW	ST OT DT	0	8	8	0	0	0	0	16		\$ 15.00		\$ 240.00	\$ 169.57	\$1.76F	\$2.67F	\$0.80F	\$0.71F
999-88-7777		N						8	8	8	16	8	\$ 15.00	\$ 22.50	\$ 420.00	\$ 301.15	1.76	2.67	0.8	0.71
133 this street	Laborer- Apprentice 50%	PW	ST OT DT	0	8	8	6	0	0	0	22		\$ 9.38		\$ 206.36	\$ 169.56	\$1.10F	\$1.67F	\$0.50F	\$0.71F
888-77-6666		N						8	8	8	16	8	\$ 9.38	\$ 14.06	\$ 262.56	\$ 220.80	1.1	1.67	0.5	0.71
Twelve D Employee 166 Any Street Anytown, None	Foreperson	PW	ST OT DT	0	8	8	8	0	0	0	24		\$ 18.75		\$ 450.00	\$ 229.34	\$2.20E	\$3.34E	\$1.00E	\$0.71E
333-22-1111		N						8	8	8	16	8	\$ 18.75	\$ 28.13	\$ 525.04	\$ 649.87	0	0	0	0
		PW	ST OT DT																	
		N																		

INSTRUCTIONS: Fringe benefits (health insurance, pension, vacation and training) must be paid, if it is required for the work classification, regardless of union or nonunion status. We give you credit for health insurance paid (if any) and ERISA approved pension plan (if any) and training if your employees are in a BAT approved program. If the fringe benefit rate is paid into a fund, please noe by placing the letter "F" behind the fringe benefit rate; if the fringe benefit rate is included c an employee's payroll check, please note by placing the letter "E" behind the fringe benefit rate. On the back of this form please list all subcontractors, independent contractors and owner operator's you company used on this project. If you wish information regarding coverage of the Act, please visit our web site at www.state.il.us/agency/idol or call 217-782-1710