



CONTRACTORS CERTIFIED PAYROLL FORM

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>									ADDRESS										
Sample Company									55 Lakeview Drive Sometown, US 55555-5555										
PAYROLL NO. 1			FOR WEEK ENDING 09/21/2018						PROJECT AND LOCATION Sample Project 1 - Sample project for demonstration only 2500 Canyon Drive Anywhere, US 55555-5555						PROJECT OR CONTRACT NO. 22354				
(1) Name, Address, and Last four (4) digits of Social Security Number of Employee	(2) Work Classification	(3) DAY AND DATE							(4) Total Hours	(5) Rate of Pay	(6) Gross Amount Earned	(7) Deductions					(8) Net Wages Paid For Week		
		Sa	Su	Mo	Tu	We	Th	Fr				FICA	With-Holding Tax	State	Local	Other		Total Deductions.	
		09/15	09/16	09/17	09/18	09/19	09/20	09/21				HOURS WORKED EACH DAY							
Jane Doe 71 Pineapple Lane Similartown, US 12345 xxx-xx-5555	Heavy Highway Labor	O	0	0	0	0	0	0	0	0	44.00	1240.00	94.86	179.06	61.85	0.00	52.00	387.77	852.23 # 6241
		S	0	0	8	8	8	8	8	40	31.00								
Johnny Doe PO Box 111 Sometown, US 95545 xxx-xx-4444	Laborer	O	0	0	0	0	0	0	0	0	37.50	600.00	45.90	41.58	18.42	6.00	30.36	142.26	457.74 # 6242
		S	0	0	8	0	8	0	8	24	25.00								
Susan Anthony 711 Patriot Way Similartown, US 95545 xxx-xx-5435	Truck Driver	O	0	0	0	0	0	0	0	0	37.50	1000.00	76.50	41.71	27.32	0.00	50.00	195.53	804.47 # 6243
		S	0	0	8	8	8	8	8	40	25.00								
Tom Jones 36 Mimosa Lane Sometown, US 95545 xxx-xx-2323	Heavy Equipment Operator	O	0	0	0	0	0	0	0	0	42.00	1120.00	85.68	81.27	68.73	8.44	33.60	277.72	842.28 # 6244
		S	0	0	8	8	8	8	8	40	28.00								
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**CONTRACTOR AND SUBCONTRACTOR
CERTIFICATIONS**

I, John Smith, am an officer with the title
(Name of Officer)
of President in the firm of Sample Company
and authorized by that firm to sign and swear, under penalty of perjury, to the validity and accuracy
of the following statements:

A. Labor Law Certification:

1. I pay or supervise the payment of laborers, workers and mechanics employed by the noted firm. During the payroll period commencing on the 15 day of September, 2018, and ending the 21 day of September, 2018, all laborers, workers and mechanics were paid wages and supplements recorded as earned on the attached payroll records. No deductions have been made either directly or indirectly from the wages and supplements other than deductions shown on payroll records.
2. Payroll records submitted for the above period and attached hereto are correct and complete, and wage rates for laborers, workers and mechanics contained therein are not less than applicable wage rates stated in the Contract and as designed by the NYS Department of Labor. The number of hours shown for each employee reflects actual hours worked by that employee. The classification shown for each employee is accurate and conforms with the work she or he performed.
3. Supplements required in the Contract that are in addition to basic hourly wages have been or will be paid to the appropriate plans, funds or programs.

B. OSHA Law Certification

1. For all contracts advertised on or after 7/18/08 and valued over \$250,000, that all laborers, workers and mechanics working on site are certified as having successfully completed the OSHA 10-hour Construction Safety and Health Course-S1537-A and have furnished a copy of proof of completion of the OSHA 10 course, as of the first certified payroll submitted and on each succeeding payroll where any new or additional employee is first listed.

C. DEC Law Certification *(Subcontractors executing this form do not make this certification):*

1. I agree to comply with the NYS Environmental Conservation Law section 19-0323, and the rules and regulations promulgated thereunder, as administered by the NYS Department of Environmental Conservation.

By: John Smith Firm Name: Sample Company
(Signature of Officer)
Title: President Firm Address: 55 Lakeview Drive
(Title of Officer) Sometown, US 55555-5555
Date: 09/24/2018

Check the appropriate box: Prime Subcontractor Project #: 22354 Contract #: 100023456