

U.S. Department of Labor

Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



Rev. Dec 2008

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>		ADDRESS		OMB No.: 1235-0008	
Sample Company		555-562-8546 1000023467		Expires: 03/31/2018	
PAYROLL NO.	FOR WEEK ENDING	PROJECT AND LOCATION			PROJECT OR CONTRACT NO.
1	07/22/2017	Sample project for demonstration only			22354

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) # Ex	(3) WORK CLASSIFICATION	O T or S T	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED PROJECT / ALL	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK		
				Su	Mo	Tu	We	Th	Fr	Sa				FICA	WITH-HOLDING TAX	STATE TAX	LOCAL TAX	OTHER		TOTAL DED.	
				07/16	07/17	07/18	07/19	07/20	07/21	07/22				HOURS WORKED EACH DAY							
Jane Doe 71 Pineapple Lane Similartown, US 12345 xxx-xx-5555	0	Heavy Equipment Operator	O	0	0	0	0	0	0	0	0	0	42.00	952.00 / 1459.00	124.62	264.64	84.79	0.00	0.00	474.05	984.95
			S	0	2	8	8	8	8	0	34	28.00	1382.00		95.01	95.91	38.13	12.42	0.75	242.22	# 4563
Johnny Doe PO Box 111 Sometown, US 95545 xxx-xx-4444	2	Laborer	O	0	0	0	0	0	0	0	0	0	30.00	800.00 / 1382.00	95.01	95.91	38.13	12.42	0.75	242.22	1139.78
			S	0	8	8	8	8	8	0	40	20.00	1382.00		95.01	95.91	38.13	12.42	0.75	242.22	# 4654
Susan Anthony 711 Patriot Way Similartown, US 95545 xxx-xx-5435	4	Heavy Equipment Operator	O	0	0	0	0	0	0	0	0	0	42.00	1120.00 / 2070.00	158.36	208.26	122.08	0.00	103.50	592.20	1477.80
			S	0	8	8	8	8	8	0	40	28.00	2070.00		158.36	208.26	122.08	0.00	103.50	592.20	1477.80
Tom Jones 36 Mimosa Lane Sometown, US 95545 xxx-xx-2323	0	Heavy Highway Pipe Fitter	O	0	0	0	0	0	0	0	0	0	37.50	1000.00 / 1285.00	98.30	228.25	39.25	9.56	0.00	375.36	909.64
			S	0	8	8	8	8	8	0	40	25.00	1285.00		98.30	228.25	39.25	9.56	0.00	375.36	909.64
			O																		
			S																		
			O																		
			S																		
			O																		
			S																		
			O																		
			S																		

While completion of Form WH- 347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C. F. R. §§ 3.3, 5.5(a). The Copeland Act (40 U. S. C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U. S. Department of Labor (DOL) regulations at 29 C. F. R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis- Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U. S. Department of Labor, Room S3502, 200 Constitution Avenue, N. W. Washington, D. C. 20210.