



FORCE ACCOUNT STATEMENT

This information required by MDOT in order to record charges on force account work performed.

C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

Length and Type of Work MANPOWER FOR 14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY

Address 24460 Novi Road

NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL

Date - Month of MARCH 1986

Name of Employee	Class of Work	Date						Total Hours	Rate	Amount	Credit Time
<u>ROY WASHINGTON</u>	<u>FOREMAN</u>	<u>24</u>	<u>4.0</u>					<u>4.0</u>	<u>34.17</u>	<u>136.68</u>	
<u>PHILIP CHAMBERS</u>	<u>FOREMAN</u>		<u>4.0</u>					<u>4.0</u>	<u>44.99</u>	<u>179.96</u>	
<u>AL MATTISON</u>	<u>LABORER</u>		<u>4.0</u>					<u>4.0</u>	<u>32.15</u>	<u>128.60</u>	
<u>CASTANA WINTERS</u>	<u>LABORER</u>		<u>4.0</u>					<u>4.0</u>	<u>32.15</u>	<u>128.60</u>	
<u>GREG PICHAN</u>	<u>LABORER</u>		<u>4.0</u>					<u>4.0</u>	<u>32.15</u>	<u>128.60</u>	
<u>LEO KELLY</u>	<u>OPERATOR</u>		<u>4.0</u>					<u>4.0</u>	<u>40.44</u>	<u>161.76</u>	
<u>SUB-TOTAL</u>										<u>864.20</u>	

Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage. Total

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT

Date	Purchased from	Item	Amount	Date of Payment
<u>Attach Original Bills for Materials and Freight</u>			<u>Total</u>	

I hereby certify that the above is a true and correct statement of labor performed and materials used in executing the work and that any materials taken from Contractor's stock represent actual cost paid for such materials. This work is covered by preliminary Authorization No. _____, Extra No. _____, dated _____

R. L. Bopatz
Contractor

Checked by _____ Resident or Project Engineer Approved by _____ District Engineer Date _____



1101 (7/84)

FORCE ACCOUNT STATEMENT

This information required by MDOT in order to record charges on force account work performed.

FILE 104

C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

Length and Type of Work EQUIPMENT FOR 14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY
Address 24460 NOVI ROAD
NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL		Date—Month of <u>MARCH</u> 19 <u>86</u>						Total Hours	Rate	Amount	Credit Time
Name of Employee	Class of Work	24									
MF 44C LOADER		4.0					4.0	76.67	306.68		
CHEVY 3/4 TON DIESEL PICKUP		4.0					4.0	8.89	35.56		
SUB-TOTAL									342.24		

Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.

Total

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT

Date	Purchased from	Item	Amount	Date of Payment
Attach Original Bills for Materials and Freight			Total	

I hereby certify that the above is a true and correct statement of labor performed and materials used in executing the work and that any materials taken from Contractor's stock represent actual cost paid for such materials. This work is covered by preliminary Authorization No. _____, Extra No. _____, dated _____

R. L. [Signature]
Contractor

Checked by _____
Resident or Project Engineer

Approved by _____
District Engineer

Date _____



1101 (7/84)

FORCE ACCOUNT STATEMENT

This information required by MDOT in order to record charges on force account work performed.

FILE 104

C. S. ID. - Job No. _____
 Fed. Item No. _____ Year _____ Route No. _____
 Fed. No. _____
 Length and Type of Work EQUIPMENT FOR
14520 SCRIPPS
 To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY
 Address 24460 NOVI ROAD
NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL		Date—Month of					19 <u>86</u>		Amount	Credit Time
Name of Employee	Class of Work		26			Total Hours	Rate			
CHEVY 3/4 TON DIESEL PICKUP			1.0			1.0	8.89	8.89		
BOBCAT 843 WITH BACKHOE			2.0			2.0	33.81	67.62		
INGERSOLL 175 COMPRESSOR			2.0			2.0	15.86	31.72		
90 POUND BREAKER			2.0			2.0	2.31	4.62		
SUB-TOTAL									112.85	
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.									Total	

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT			Amount	Date of Payment
Date	Purchased from	Item		
Attach Original Bills for Materials and Freight			Total	

I hereby certify that the above is a true and correct statement of labor performed and materials used in executing the work and that any materials taken from Contractor's stock represent actual cost paid for such materials. This work is covered by preliminary Authorization No. _____, Extra No. _____, dated _____

Checked by _____ Resident or Project Engineer Approved by R. L. Bryant District Engineer Date _____ Contractor



1101 (7/84)

FORCE ACCOUNT STATEMENT

This information required by MDOT in order to record charges on force account work performed.

FILE 104

C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

Length and Type of Work MANPOWER FOR 14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY

Address 24460 NOWI ROAD

NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL

Date—Month of MARCH 1986

Name of Employee	Class of Work		26					Total Hours	Rate	Amount	Credit Time
<u>ROY WASHINGTON</u>	<u>FOREMAN</u>		<u>1.0</u>					<u>1.0</u>	<u>22.78</u>	<u>22.78</u>	
<u>PHILIP CHAMBERS</u>	<u>FOREMAN</u>		<u>2.0</u>					<u>2.0</u>	<u>29.99</u>	<u>59.98</u>	
<u>AL MATTISON</u>	<u>LABORER</u>		<u>2.0</u>					<u>2.0</u>	<u>21.43</u>	<u>42.86</u>	
<u>GREGORY PICHAN</u>	<u>LABORER</u>		<u>2.0</u>					<u>2.0</u>	<u>21.43</u>	<u>42.86</u>	
<u>LEO KELLY</u>	<u>OPERATOR</u>		<u>2.0</u>					<u>2.0</u>	<u>26.96</u>	<u>53.92</u>	
<u>JAMES LESURE</u>	<u>CARPENTER</u>		<u>2.0</u>					<u>2.0</u>	<u>28.79</u>	<u>57.58</u>	
<u>CYNTHIA GRIER</u>	<u>LABORER</u>		<u>2.0</u>					<u>2.0</u>	<u>21.43</u>	<u>42.86</u>	
<u>SUB-TOTAL</u>										<u>322.84</u>	
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.										Total	

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT

Date	Purchased from	Item	Amount	Date of Payment
Attach Original Bills for Materials and Freight			Total	

I hereby certify that the above is a true and correct statement of labor performed and materials used in executing the work and that any materials taken from Contractor's stock represent actual cost paid for such materials. This work is covered by preliminary Authorization No. _____, Extra No. _____, dated _____.

Checked by _____ Approved by _____ Date _____
Resident or Project Engineer District Engineer Contractor

R. L. Roberts
Contractor



FORCE ACCOUNT STATEMENT
This information required by MDOT in order to record charges on force account work performed.

C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

Length and Type of Work EQUIPMENT FOR
14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY
Address 24460 NOVI ROAD
NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL		Date—Month of						Total Hours	Rate	Amount	Credit Time
		25									
Name of Employee	Class of Work										
CHEVY ³ / ₄ TON DIESEL PICKUP		4.0					4.0	8.89	35.56		
GMC ³ / ₄ TON DIESEL PICKUP		1.0					1.0	8.89	8.89		
BOBCAT 843 WITH BACKHOE		6.0					6.0	33.81	202.86		
INGERSOLL 175 COMPRESSOR		6.0					6.0	15.86	95.16		
90 POUND BREAKER		6.0					6.0	2.31	13.86		
SUB-TOTAL									356.33		
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.										Total	

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT			Amount	Date of Payment
Date	Purchased from	Item		
Attach Original Bills for Materials and Freight			Total	

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R. L. Boyer
Contractor

Checked by _____ Resident or Project Engineer Approved by _____ District Engineer Date _____



1101 (7/84)

FORCE ACCOUNT STATEMENT

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C. S. ID. - Job No. _____
 Fed. Item No. _____ Year _____ Route No. _____
 Fed. No. _____
 Length and Type of Work MANPOWER FOR 14520 SCRIPPS
 To Accompany Recommendation No. _____ Date _____

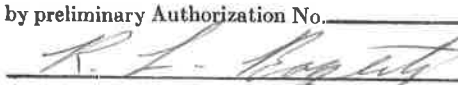
Contractor O'LAUGHLIN CONSTRUCTION COMPANY
 Address 24460 NOVI ROAD
NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL		Date—Month of <u>MARCH</u> 19 <u>86</u>						Total Hours	Rate	Amount	Credit Time
Name of Employee	Class of Work	25									
ROY WASHINGTON	FOREMAN	4.0					4.0	22.78	91.12		
PHILIP CHAMBERS	FOREMAN	8.0					8.0	29.99	239.92		
AL MATTISON	LABORER	8.0					8.0	21.43	171.44		
GREGORY PICHAN	LABORER	8.0					8.0	21.43	171.44		
LEO KELLY	OPERATOR	8.0					8.0	26.96	215.68		
JAMES LESORE	CARPENTER	2.0					2.0	28.79	57.58		
CYNTHIA GRIER	LABORER	8.0					8.0	21.43	171.44		
PATRICK McCUE	SUPERINTENDENT	1.0					1.0	35.00	35.00		
									<u>1,153.62</u>		
		SUB-TOTAL									

Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage. Total

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT			Amount	Date of Payment
Date	Purchased from	Item		
Attach Original Bills for Materials and Freight			Total	

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 Contractor

Checked by _____ Resident or Project Engineer
 Approved by _____ District Engineer
 Date _____



FORCE ACCOUNT STATEMENT
This information required by MDOT in order to record charges on force account work performed.

FILE 104

C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

Length and Type of Work EQUIPMENT FOR 14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY
Address 24460 NOVI ROAD
NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL		Date—Month of					19 <u>86</u>		Amount	Credit Time
Name of Employee	Class of Work					Total Hours	Rate			
MF 44C LOADER				27		4.0	76.67	306.68		
CHEVY 3/4 TON DIESEL PICKUP				2.0		2.0	8.89	17.78		
INGERSOLL 175 COMPRESSOR				4.0		4.0	15.86	63.44		
BOBCAT 843				4.0		4.0	25.31	101.24		
FORD 3/4 TON GAS PICKUP				4.0		4.0	13.53	54.12		
SUB-TOTAL									543.26	
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.								Total		

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT

Date	Purchased from	Item	Amount		Date of Payment
Attach Original Bills for Materials and Freight			Total		

I hereby certify that the above is a true and correct statement of labor performed and materials used in executing the work and that any materials taken from Contractor's stock represent actual cost paid for such materials. This work is covered by preliminary Authorization No. _____, Extra No. _____, dated _____

Checked by _____ Resident or Project Engineer
Approved by R. L. Bryant Contractor
District Engineer _____ Date _____



FORCE ACCOUNT STATEMENT
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C. S. ID. - Job No. _____
 Fed. Item No. _____ Year _____ Route No. _____
 Fed. No. _____
 Length and Type of Work MANPOWER FOR 14520 SCRIPPS
 To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY
 Address 24460 Novi Road
Novi, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL		Date—Month of <u>APRIL</u> 19 <u>86</u>						Total Hours	Rate	Amount	Credit Time
Name of Employee	Class of Work										
ROY WASHINGTON	FOREMAN					4.0	4.0	24.64	98.56		
LEO KELLY	OPERATOR					2.0	2.0	40.44	80.88		
SUB-TOTAL									179.44		
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.										Total	

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT				Amount	Date of Payment
Date	Purchased from	Item			
Attach Original Bills for Materials and Freight				Total	

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R.L. Bopatz
 Contractor

Checked by _____ Resident or Project Engineer
 Approved by _____ District Engineer
 Date _____



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1101 (7/84)

C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

Length and Type of Work EQUIPMENT FOR 14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY
Address 24460 NOVI ROAD
NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL

Date—Month of APRIL 1986

Name of Employee	Class of Work				4			Total Hours	Rate	Amount	Credit Time
FORD 3/4 TON GAS PICKUP					4.0			4.0	13.53	54.12	
BOBCAT 843					2.0			2.0	25.31	50.62	
SUB-TOTAL										104.74	
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.										Total	

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT

Date	Purchased from	Item	Amount		Date of Payment
Attach Original Bills for Materials and Freight			Total		

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Checked by _____ Resident or Project Engineer
Approved by R. L. Boppe District Engineer
Date _____ Contractor



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Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

Length and Type of Work EQUIPMENT FOR 14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor OLAUGHLIN CONSTRUCTION COMPANY
 Address 24460 NOVI ROAD
NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL

Date—Month of APRIL 1986

Name of Employee	Class of Work	8	9	10	11	12	13	14	15	16	17	18	19	20	Total Hours	Rate	Amount	Credit Time	
CHEVY 3/4 TON DIESEL PICKUP		1.0													1.0	8.89	8.89		
BOBCAT 843		1.0													1.0	25.31	25.31		
HOBART 422 DIESEL GENERATOR		1.0													1.0	12.41	12.41		
SUB-TOTAL																		46.61	

Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage. Total

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT

Date	Purchased from	Item	Amount	Date of Payment

Attach Original Bills for Materials and Freight Total

I hereby certify that the above is a true and correct statement of labor performed and materials used in executing the work and that any materials taken from Contractor's stock represent actual cost paid for such materials. This work is covered by preliminary Authorization No. _____, Extra No. _____, dated _____

R. L. [Signature]
Contractor

Checked by _____ Approved by _____ Date _____
Resident or Project Engineer District Engineer



FORCE ACCOUNT STATEMENT

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C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

MANPOWER FOR CLEANUP OF
Length and Type of Work 14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY
Address 27460 NOVI ROAD
NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL		Date—Month of					Total Hours	Rate	Amount	Credit Time
Name of Employee	Class of Work		9							
LEO KELLY	OPERATOR		1.0				1.0	40.44	40.44	
SUB-TOTAL									40.44	
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.									Total	

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT			Amount	Date of Payment
Date	Purchased from	Item		
Attach Original Bills for Materials and Freight			Total	

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Contractor

Checked by _____ Resident or Project Engineer Approved by _____ District Engineer Date _____



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C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

Length and Type of Work MANPOWER FOR 14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor OLAUGHLIN CONSTRUCTION COMPANY
 Address 24460 NOVI ROAD
NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL

Date—Month of APRIL 1986

Name of Employee	Class of Work	15						Total Hours	Rate	Amount	Credit Time
<u>GORDON PENNER</u>	<u>FOREMAN</u>	<u>4.0</u>						<u>4.0</u>	<u>23.55</u>	<u>94.20</u>	
<u>ARVIL WRIGHT</u>	<u>LABORER</u>	<u>4.0</u>						<u>4.0</u>	<u>21.43</u>	<u>85.72</u>	
<u>SUB-TOTAL</u>										<u>179.92</u>	
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.											Total

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT

Date	Purchased from	Item	Amount	Date of Payment
Attach Original Bills for Materials and Freight			Total	

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Checked by _____ Resident or Project Engineer Approved by R. L. Bogach District Engineer Date _____ Contractor



1101 (7/84)

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C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

Length and Type of Work EQUIPMENT FOR
14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY
Address 24460 NOVI ROAD
NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL		Date—Month of.....							Total Hours	Rate	Amount	Credit Time
Name of Employee	Class of Work	15										
BOBCAT 843		4.0						4.0	25.31	101.24		
LINCOLN 225 WELDER		4.0						4.0	4.86	19.44		
SUB-TOTAL										120.68		

Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage. Total

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT			Amount	Date of Payment
Date	Purchased from	Item		
Total				

Attach Original Bills for Materials and Freight

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Checked by _____ Resident or Project Engineer Approved by R. J. Bonatz District Engineer Date _____ Contractor



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FILE 104

Contractor O'LAUGHLIN CONSTRUCTION COMPANY
 Address 24460 NOVI ROAD
NOVI, MICHIGAN 48050

C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

Length and Type of Work MANPOWER FOR 14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

PAYROLL AND EQUIPMENT RENTAL		Date—Month of <u>APRIL</u> 19 <u>86</u>						Total Hours	Rate	Amount	Credit Time
Name of Employee	Class of Work	1	2	3	4	5					
GORDON PENNER	FOREMAN	2.0						2.0	35.33	70.66	
ARVIL WRIGHT	LABORER	2.0						2.0	32.15	64.30	
SUB-TOTAL										134.96	
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.										Total	

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT			Amount	Date of Payment
Date	Purchased from	Item		
Attach Original Bills for Materials and Freight			Total	

I hereby certify that the above is a true and correct statement of labor performed and materials used in executing the work and that any materials taken from Contractor's stock represent actual cost paid for such materials. This work is covered by preliminary Authorization No. _____, Extra No. _____, dated _____

R. L. [Signature]
Contractor

Checked by _____ Resident or Project Engineer
 Approved by _____ District Engineer
 Date _____



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 Fed. Item No. _____ Year _____ Route No. _____
 Fed. No. _____
 Length and Type of Work EQUIPMENT FOR 14520 SCRIPPS
 To Accompany Recommendation No. _____ Date _____

Contractor OLAUGHLIN CONSTRUCTION COMPANY
 Address 24460 NOVI ROAD
NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL		Date—Month of						Total Hours	Rate	Amount	Credit Time
		14									
FORD 3/4 TON GAS PICKUP		2.0					2.0	13.53	27.06		
LINCOLN 225 WELDER		2.0					2.0	4.86	9.72		
SUB-TOTAL										36.78	
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.										Total	

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT				Amount	Date of Payment
Date	Purchased from	Item			
Total					

Attach Original Bills for Materials and Freight

I hereby certify that the above is a true and correct statement of labor performed and materials used in executing the work and that any materials taken from Contractor's stock represent actual cost paid for such materials. This work is covered by preliminary Authorization No. _____, Extra No. _____, dated _____

Checked by _____ Resident or Project Engineer
 Approved by R. J. [Signature] District Engineer
 Contractor _____ Date _____

1986

14520 SCRIPPS

LABOR

EQUIPMENT

3-24	86420	32424
25	115362	35633
26	32284	11285
3-27	44480	54326
4-4	17944	10474
8	10182	4661
9	4044	7667
14	13496	3678
15	17992	12068

March 25 thru May 16 342204 ✓ 174016 ✓

Site width 52.5 feet

Sheet piling - 49' between house and
boat house - garage, extended to the east

Concrete - break out & removal

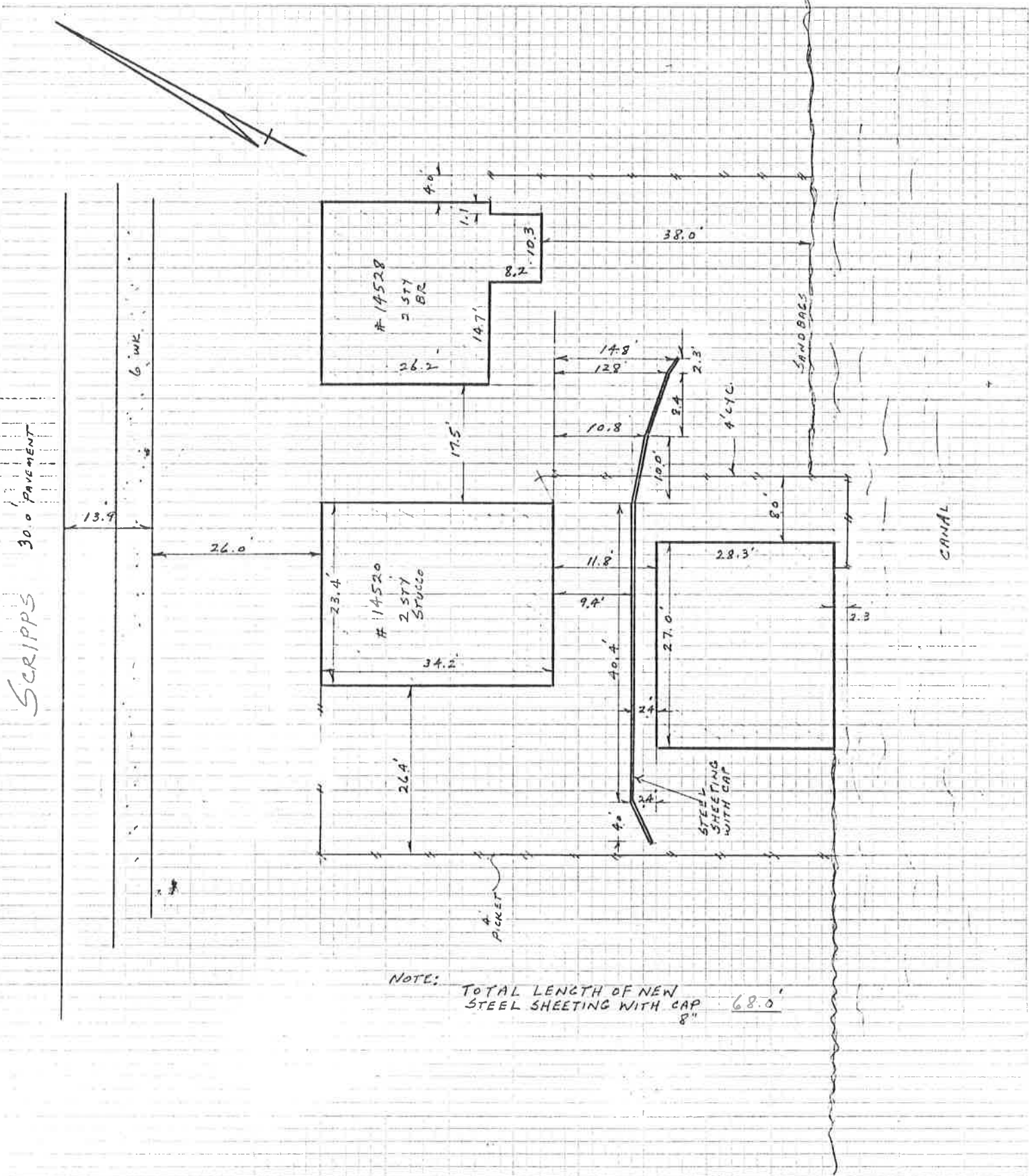
Driveway - damage during construction repaired
with gravel.

86-22-28
 STEEL SHEETING LOCATION
 # 14520 SCRIPPS
 # 14528 SCRIPPS
 4/29/86

Drawn: [unclear] [unclear] [unclear]

J. DREWS, P.C.
 Job Number

Page



NOTE: TOTAL LENGTH OF NEW STEEL SHEETING WITH CAP 68.0' 8"

14520 555
 14528 45

C of D-53-SH

LABOR	3,422.04
EQUIPMENT	1,740.16
MATERIAL	1,994.10
JOBSITE DIRECT COST	422.55
INDIRECT JOBSITE COST	692.34
GENERAL LIABILITY INSURANCE	610.71
PLUS - 10% OVERHEAD	888.19
PLUS - 15% PROFIT	1,465.51
PLUS - 1% BOND	112.36
TOTAL - TO DATE	\$ 11,347.96



COPY
FORCE ACCOUNT STATEMENT
This information required by MDOT in order to record charges on force account work performed.

C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

EQUIPMENT FOR

Length and Type of Work 14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY

Address 24460 NOVI ROAD

NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL

Date—Month of APRIL 1986

Name of Employee	Class of Work	14							Total Hours	Rate	Amount	Credit Time
FORD 3/4 TON GAS PICKUP		2.0							2.0	13.53	27.06	
LINCOLN 225 WELDER		2.0							2.0	4.86	9.72	
SUB-TOTAL											36.78	

Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.

Total

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT

Date	Purchased from	Item	Amount	Date of Payment
Attach Original Bills for Materials and Freight			Total	

I hereby certify that the above is a true and correct statement of labor performed and materials used in executing the work and that any materials taken from Contractor's stock represent actual cost paid for such materials. This work is covered by preliminary Authorization No. _____, Extra No. _____, dated _____

R. J. Boyce
Contractor

Checked by _____ Resident or Project Engineer Approved by _____ District Engineer Date _____



COPY

FORCE ACCOUNT STATEMENT

This information required by MDOT in order to record charges on force account work performed.

C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

Length and Type of Work MANPOWER FOR 14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY
Address 24460 NOVI ROAD
NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL		Date—Month of <u>APRIL</u> 19 <u>86</u>						Total Hours	Rate	Amount	Credit Time
Name of Employee	Class of Work	14									
<u>GORDON PENNER</u>	<u>FOREMAN</u>	2.0					2.0	35.33	70.66		
<u>ARVIL WRIGHT</u>	<u>LABORER</u>	2.0					2.0	32.15	64.30		
<u>SUB-TOTAL</u>									<u>134.96</u>		
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.										Total	

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT			Amount	Date of Payment
Date	Purchased from	Item		
Attach Original Bills for Materials and Freight			Total	

I hereby certify that the above is a true and correct statement of labor performed and materials used in executing the work and that any materials taken from Contractor's stock represent actual cost paid for such materials. This work is covered by preliminary Authorization No. _____, Extra No. _____, dated _____

R. L. Popple
Contractor

Checked by _____ Resident or Project Engineer Approved by _____ District Engineer Date _____



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FORCE ACCOUNT STATEMENT

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FILE 104

C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____
EQUIPMENT FOR CLEANUP OF

Length and Type of Work 14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY
Address 24460 NOVI ROAD
NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL

Date—Month of APRIL 1986

Name of Employee	Class of Work	Date							Total Hours	Rate	Amount	Credit Time
MF 44C LOADER				9					1.0	76.67	76.67	
SUB-TOTAL											76.67	

Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage. Total

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT

Date	Purchased from	Item	Amount		Date of Payment
Attach Original Bills for Materials and Freight			Total		

I hereby certify that the above is a true and correct statement of labor performed and materials used in executing the work and that any materials taken from Contractor's stock represent actual cost paid for such materials. This work is covered by preliminary Authorization No. _____, Extra No. _____, dated _____.

R. L. Lopez
Contractor

Checked by _____ Resident or Project Engineer Approved by _____ District Engineer Date _____



COPY FORCE ACCOUNT STATEMENT

This information required by MDOT in order to record charges on force account work performed.

FILE 104

C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____
MANPOWER FOR CLEANUP OF
Length and Type of Work 14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY
Address 24460 NOVI ROAD
NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL

Date—Month of APRIL 1986

Name of Employee	Class of Work	Date—Month of						Total Hours	Rate	Amount	Credit Time
<u>LEO KELLY</u>	<u>OPERATOR</u>			<u>9</u>				<u>1.0</u>	<u>40.44</u>	<u>40.44</u>	
<u>SUB-TOTAL</u>										<u>40.44</u>	
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.										Total	

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT

Date	Purchased from	Item	Amount	Date of Payment
Attach Original Bills for Materials and Freight			Total	

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R. L. Kopyev
Contractor

Checked by _____ Resident or Project Engineer Approved by _____ District Engineer Date _____



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C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

Length and Type of Work EQUIPMENT FOR 14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY
Address 24460 NOVI ROAD
NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL

Date—Month of APRIL 1986

Name of Employee	Class of Work	8	Total Hours	Rate	Amount	Credit Time
CHEV 3/4 TON DIESEL PICKUP		1.0	1.0	8.89	8.89	
BOBCAT 843		1.0	1.0	25.31	25.31	
HOBART 422 DIESEL GENERATOR		1.0	1.0	12.41	12.41	
SUB-TOTAL					46.61	
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.						Total

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT

Date	Purchased from	Item	Amount	Date of Payment
Attach Original Bills for Materials and Freight			Total	

I hereby certify that the above is a true and correct statement of labor performed and materials used in executing the work and that any materials taken from Contractor's stock represent actual cost paid for such materials. This work is covered by preliminary Authorization No. _____, Extra No. _____, dated _____

R. J. [Signature]
Contractor

Checked by _____ Approved by _____ Date _____
Resident or Project Engineer District Engineer



1101 (7/84)

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FORCE ACCOUNT STATEMENT

This information required by MDOT in order to record charges on force account work performed.

FILE 104

C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

Length and Type of Work MANPOWER FOR 14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY
Address 24460 NOVI ROAD
NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL

Date—Month of APRIL 1986

Name of Employee	Class of Work	8	Total Hours	Rate	Amount	Credit Time
ROY WASHINGTON	FOREMAN	1.0	1.0	24.64	24.64	
LEG KELLY	OPERATOR	1.0	1.0	26.96	26.96	
JAMES LESURE	CARPENTER	1.0	1.0	28.79	28.79	
ARUL WRIGHT	LABORER	1.0	1.0	21.43	21.43	
SUB-TOTAL					101.82	
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.						Total

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT

Date	Purchased from	Item	Amount	Date of Payment
Attach Original Bills for Materials and Freight			Total	

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R. L. Roberts
Contractor

Checked by _____ Approved by _____ Date _____
Resident or Project Engineer District Engineer



FORCE ACCOUNT STATEMENT
This information required by MDOT in order to record charges on force account work performed.

FILE 104

C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

Length and Type of Work MANPOWER FOR 14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY
 Address 24460 Novi Road
Novi, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL		Date—Month of				APRIL 1986		Amount	Credit Time
Name of Employee	Class of Work					Total Hours	Rate		
ROY WASHINGTON	FOREMAN				4	4.0	24.64	98.56	
LEO KELLY	OPERATOR				2	2.0	40.44	80.88	
SUB-TOTAL								179.44	
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.								Total	

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT

Date	Purchased from	Item	Amount		Date of Payment
Attach Original Bills for Materials and Freight			Total		

I hereby certify that the above is a true and correct statement of labor performed and materials used in executing the work and that any materials taken from Contractor's stock represent actual cost paid for such materials. This work is covered by preliminary Authorization No. _____, Extra No. _____, dated _____

R.L. Boppre
Contractor

Checked by _____ Resident or Project Engineer Approved by _____ District Engineer Date _____



ADOT
FORCE ACCOUNT STATEMENT
 This information required by MDOT in order to record charges on force account work performed.

C. S. ID. — Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

Length and Type of Work EQUIPMENT FOR
14520 SCRIPPS


To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY
 Address 24460 NOVI ROAD
NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL		Date—Month of					19 <u>86</u>		Amount	Credit Time
Name of Employee	Class of Work					Total Hours	Rate			
MF 44C LOADER						4.0	76.67	306.68		
CHEVY 3/4 TON DIESEL PICKUP						2.0	8.89	17.78		
INGERSOLL 175 COMPRESSOR						4.0	15.86	63.44		
BOBCAT 843						4.0	25.31	101.24		
FORD 3/4 TON GAS PICKUP						4.0	13.53	54.12		
SUB-TOTAL									543.26	
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.								Total		

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT					Amount	Date of Payment
Date	Purchased from	Item				
Attach Original Bills for Materials and Freight					Total	

I hereby certify that the above is a true and correct statement of labor performed and materials used in executing the work and that any materials taken from Contractor's stock represent actual cost paid for such materials. This work is covered by preliminary Authorization No. _____, Extra No. _____, dated _____


 Contractor

Checked by _____ Resident or Project Engineer Approved by _____ District Engineer Date _____



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C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

MANPOWER FOR

Length and Type of Work 14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY
Address 24460 NOV. ROAD
NOV, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL		Date—Month of MARCH 1986					Total Hours	Rate	Amount	Credit Time
Name of Employee	Class of Work				27					
ROY WASHINGTON	FOREMAN				2.0		22.78	45.56		
PHILIP CHAMBERS	FOREMAN				4.0		29.99	119.96		
AL MATTISON	LABORER				4.0		21.43	85.72		
LEO KELLY	OPERATOR				4.0		26.96	107.84		
CYNTHIA GRIER	LABORER				4.0		21.43	85.72		
SUB-TOTAL								444.80		
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.									Total	

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT

Date	Purchased from	Item	Amount	Date of Payment
Attach Original Bills for Materials and Freight			Total	

I hereby certify that the above is a true and correct statement of labor performed and materials used in executing the work and that any materials taken from Contractor's stock represent actual cost paid for such materials. This work is covered by preliminary Authorization No. _____, Extra No. _____, dated _____

[Signature]
Contractor

Checked by _____ Resident or Project Engineer Approved by _____ District Engineer Date _____



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FORCE ACCOUNT STATEMENT

This information required by MDOT in order to record charges on force account work performed.

FILE 104

C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

Length and Type of Work MANPOWER FOR 14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY
Address 24460 NOVI ROAD
NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL

Date—Month of MARCH 1986

Name of Employee	Class of Work	Date—Month of							Total Hours	Rate	Amount	Credit Time
		<u>26</u>										
<u>ROY WASHINGTON</u>	<u>FOREMAN</u>								<u>1.0</u>	<u>22.78</u>	<u>22.78</u>	
<u>PHILIP CHAMBERS</u>	<u>FOREMAN</u>								<u>2.0</u>	<u>29.99</u>	<u>59.98</u>	
<u>AL MATTISON</u>	<u>LABORER</u>								<u>2.0</u>	<u>21.43</u>	<u>42.86</u>	
<u>GREGORY PICHAN</u>	<u>LABORER</u>								<u>2.0</u>	<u>21.43</u>	<u>42.86</u>	
<u>LEO KELLY</u>	<u>OPERATOR</u>								<u>2.0</u>	<u>26.96</u>	<u>53.92</u>	
<u>JAMES LESURE</u>	<u>CARPENTER</u>								<u>2.0</u>	<u>28.79</u>	<u>57.58</u>	
<u>CYNTHIA GRIER</u>	<u>LABORER</u>								<u>2.0</u>	<u>21.43</u>	<u>42.86</u>	
<u>SUB-TOTAL</u>										<u>322.84</u>		
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.												
										Total		

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT

Date	Purchased from	Item	Amount		Date of Payment
Attach Original Bills for Materials and Freight			Total		

I hereby certify that the above is a true and correct statement of labor performed and materials used in executing the work and that any materials taken from Contractor's stock represent actual cost paid for such materials. This work is covered by preliminary Authorization No. _____, Extra No. _____, dated _____

Contractor

Checked by _____ Resident or Project Engineer Approved by _____ District Engineer Date _____



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C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

Length and Type of Work EQUIPMENT FOR 14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY
Address 24460 NOVI ROAD
NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL

Date—Month of MARCH 1986

Name of Employee	Class of Work	26	Total Hours	Rate	Amount	Credit Time
CHEVY 3/4 TON DIESEL PICKUP		1.0	1.0	8.89	8.89	
BOBCAT 843 WITH BACKHOE		2.0	2.0	33.81	67.62	
INGERSOLL 175 COMPRESSOR		2.0	2.0	15.86	31.72	
90 POUND BREAKER		2.0	2.0	2.31	4.62	
SUB-TOTAL					112.85	

Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage. Total

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT

Date	Purchased from	Item	Amount	Date of Payment
Attach Original Bills for Materials and Freight			Total	

I hereby certify that the above is a true and correct statement of labor performed and materials used in executing the work and that any materials taken from Contractor's stock represent actual cost paid for such materials. This work is covered by preliminary Authorization No. _____, Extra No. _____, dated _____

R. L. Bogarty
Contractor

Checked by _____ Resident or Project Engineer Approved by _____ District Engineer Date _____



FORCE ACCOUNT STATEMENT
This information required by MDOT in order to record charges on force account work performed.

FILE 104

C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

Length and Type of Work EQUIPMENT FOR 14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY
 Address 24450 NOVI ROAD
NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL		Date—Month of <u>MARCH</u> 19 <u>86</u>							Amount	Credit Time
Name of Employee	Class of Work	25				Total Hours	Rate			
CHEVY 3/4 TON DIESEL PICKUP		4.0				4.0	8.89	35.56		
GMC 3/4 TON DIESEL PICKUP		1.0				1.0	8.89	8.89		
BOBCAT 843 WITH BACKHOE		6.0				6.0	33.81	202.86		
INGERSOLL 175 COMPRESSOR		6.0				6.0	15.86	95.16		
90 POUND BREAKER		6.0				6.0	2.31	13.86		
SUB-TOTAL									356.33	

Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.

Total

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT

Date	Purchased from	Item	Amount		Date of Payment
Attach Original Bills for Materials and Freight			Total		

I hereby certify that the above is a true and correct statement of labor performed and materials used in executing the work and that any materials taken from Contractor's stock represent actual cost paid for such materials. This work is covered by preliminary Authorization No. _____, Extra No. _____, dated _____

R. L. Boyette
Contractor

Checked by _____ Resident or Project Engineer Approved by _____ District Engineer Date _____



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C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

Length and Type of Work MANPOWER FOR 14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY
Address 24460 NOVI ROAD
NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL		Date—Month of <u>MARCH</u> 19 <u>86</u>					Total Hours	Rate	Amount	Credit Time
Name of Employee	Class of Work	25								
ROY WASHINGTON	FOREMAN	4.0				4.0	22.78	91.12		
PHILIP CHAMBERS	FOREMAN	8.0				8.0	29.99	239.92		
AL MATTILSON	LABORER	8.0				8.0	21.43	171.44		
GREGORY PICHAN	LABORER	8.0				8.0	21.43	171.44		
LEO KELLY	OPERATOR	8.0				8.0	26.96	215.68		
JAMES LESURE	CARPENTER	2.0				2.0	28.79	57.58		
CYNTHIA GRIER	LABORER	8.0				8.0	21.43	171.44		
PATRICK M ^C CUE	SUPERINTENDENT	1.0				1.0	35.00	35.00		
SUB-TOTAL									1,153.62	
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.								Total		

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT			Amount	Date of Payment
Date	Purchased from	Item		
Attach Original Bills for Materials and Freight			Total	

I hereby certify that the above is a true and correct statement of labor performed and materials used in executing the work and that any materials taken from Contractor's stock represent actual cost paid for such materials. This work is covered by preliminary Authorization No. _____, Extra No. _____, dated _____.

Checked by _____ Resident or Project Engineer Approved by R. F. [Signature] District Engineer Date _____ Contractor



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FORCE ACCOUNT STATEMENT

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FILE 104

C. S. ID. - Job No. _____

Fed. Item No. _____ Year _____ Route No. _____

Fed. No. _____

Length and Type of Work MANPOWER FOR 14520 SCRIPPS

To Accompany Recommendation No. _____ Date _____

Contractor O'LAUGHLIN CONSTRUCTION COMPANY
Address 24460 NOWI ROAD
NOVI, MICHIGAN 48050

PAYROLL AND EQUIPMENT RENTAL

Date - Month of MARCH 1986

Name of Employee	Class of Work	24					Total Hours	Rate	Amount	Credit Time
ROY WASHINGTON	FOREMAN	4.0					4.0	34.17	136.68	
PHILIP CHAMBERS	FOREMAN	4.0					4.0	44.99	179.96	
AL MATTISON	LABORER	4.0					4.0	32.15	128.60	
CASTANA WINTERS	LABORER	4.0					4.0	32.15	128.60	
GREG PICHAN	LABORER	4.0					4.0	32.15	128.60	
LEO KELLY	OPERATOR	4.0					4.0	40.44	161.76	
SUB-TOTAL									864.20	

Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.

Total

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT

Date	Purchased from	Item	Amount		Date of Payment
Attach Original Bills for Materials and Freight			Total		

I hereby certify that the above is a true and correct statement of labor performed and materials used in executing the work and that any materials taken from Contractor's stock represent actual cost paid for such materials. This work is covered by preliminary Authorization No. _____, Extra No. _____, dated _____

A. L. Bopatz
Contractor

Checked by _____ Approved by _____ Date _____