



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  
14684 KLENK

To Accompany Recommendation No. \_\_\_\_\_ Date \_\_\_\_\_

Contractor O'LAUGHLIN CONSTRUCTION CO.  
Address 24460 NOVI ROAD  
NOVI, MICHIGAN

PAYROLL AND EQUIPMENT RENTAL		Date—Month of.....					19.....		Amount	Credit Time
Name of Employee	Class of Work	28					Total Hours	Rate		
CYNTHIA GRIER	OPERATOR	8					8.0	19.59	156.72	
AL MATTISON	LABORER	8					8.0	24.75	198.00	
ROY WASHINGTON	FOREMAN	2					2.0	26.54	53.08	
ARVIL WRIGHT	LABORER	1					1.0	24.75	24.75	
PAT McKEON	LABORER	8					8.0	18.83	150.64	
DON PULK	LABORER	5					5.0	25.93	129.65	
SUB-TOTAL									712.84	
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.									Total	712.84

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 [Signature] District Engineer  
Contractor [Signature] 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  
14684 KLENK

To Accompany Recommendation No. \_\_\_\_\_ Date \_\_\_\_\_

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

PAYROLL AND EQUIPMENT RENTAL		Date—Month of.....19.....							Total Hours	Rate	Amount	Credit Time
Name of Employee	Class of Work											
<u>INGERSOL 375 COMPRESSOR</u>		<u>6</u>							<u>6.0</u>	<u>31.58</u>	<u>189.48</u>	
<u>90 LB BREAKER</u>		<u>6</u>							<u>6.0</u>	<u>2.31</u>	<u>13.86</u>	
<u>FORD 3/4T GAS P/U</u>		<u>1</u>							<u>1.0</u>	<u>13.53</u>	<u>13.53</u>	
<u>CHEVY 3/4T DIESEL P/U</u>		<u>2</u>							<u>2.0</u>	<u>8.89</u>	<u>17.78</u>	
<u>SUB TOTAL</u>											<u>234.65</u>	
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.										<b>Total</b>	<u>234.65</u>	

#### STATEMENT OF BILLS FOR MATERIALS AND FREIGHT

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

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Checked by \_\_\_\_\_ Approved by [Signature] Date \_\_\_\_\_  
Resident or Project Engineer District Engineer 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. MANPOWER & EQUIPMENT

Length and Type of Work 14684 KLENX

To Accompany Recommendation No. \_\_\_\_\_ Date \_\_\_\_\_

Contractor O'LAUGHLIN CONST CO  
 Address 24960 NOVI RD  
NOVI, MICH 48050

PAYROLL AND EQUIPMENT RENTAL		Date—Month of <u>JULY</u> 19 <u>86</u>				Total Hours	Rate	Amount	Credit Time	
CYNTHIA GRÆR	OPERATOR	8				8.0	19.59	156.72		
AL MATTISON	LABORER	8				8.0	24.75	198.00		
JERRY CHILDRESS	LABORER	8				8.0	24.75	198.00		
ROY WASHINGTON	FOREMAN	2				2.0	26.54	53.08		
DON PULK	LABORER	4				4.0	25.93	103.72		
<b>SUB-TOTAL</b>								<b>709.52</b>		
INGERSOLL 375 COMPRESSOR		6				6.0	31.58	189.48		
90 LB BREAKER		6				6.0	2.31	13.86		
CHEV 3/4 T P/U DIESEL		2				2.0	8.89	17.78		
FORD 3/4 T P/U GAS		2				2.0	13.53	27.06		
<b>SUB-TOTAL</b>								<b>248.19</b>		
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.								<b>Total</b>	<b>957.71</b>	

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT			Amount	Date of Payment
Date	Purchased from	Item		
<del>7-29-86</del>	<del>KOENIG</del>	<del>FLY ASH - 20405</del>		
Attach Original Bills for Materials and Freight			<b>Total</b>	

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R. L. Lopez  
Contractor

Checked by \_\_\_\_\_ Resident or Project Engineer      Approved by \_\_\_\_\_ District Engineer      Date \_\_\_\_\_



### FORCE ACCOUNT STATEMENT

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C. S. ID. - Job No. \_\_\_\_\_

Fed. Item No. \_\_\_\_\_ Year \_\_\_\_\_ Route No. \_\_\_\_\_

Fed. No. 14684 KLENK

Length and Type of Work SP CAP

To Accompany Recommendation No. \_\_\_\_\_ Date \_\_\_\_\_

Contractor B'LAUGHLIN CONST CO.

Address \_\_\_\_\_

#### PAYROLL AND EQUIPMENT RENTAL

Date—Month of AUG 19\_\_\_\_\_

Name of Employee	Class of Work		5	6	7	8	9	10	Total Hours	Rate	Amount	Credit Time	
ARVIL WRIGHT	LABORER		8						8	24.75	198.00		
DON PULK	LABORER		4						4	25.93	103.72		
SUB-TOTAL											301.72		
FORD F150 3/4T PM GAS			6						6	13.53	81.18		
LINCOLN 225 WELDER			8						8	4.86	38.88		
SUB TOTAL											120.06		
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.											Total	421.78	

#### 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. [Signature]  
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.

C. S. ID. - Job No. \_\_\_\_\_

Fed. Item No. \_\_\_\_\_ Year: \_\_\_\_\_ Route No. \_\_\_\_\_

Fed. No. MANPOWER & EQUIPMENT

Length and Type of Work 14684 KLENK

WELDING - CLAY TAMP  
To Accompany Recommendation No. \_\_\_\_\_ Date \_\_\_\_\_

Contractor O'LAUGHLIN CONST CO  
Address \_\_\_\_\_

**PAYROLL AND EQUIPMENT RENTAL**

Date—Month of AUGUST 1986

Name of Employee	Class of Work	4							Total Hours	Rate	Amount	Credit Time	
<u>ARVIL WRIGHT</u>	<u>LABORER</u>	<u>8</u>							<u>8</u>	<u>24.75</u>	<u>198.00</u>		
<u>AL MATTISON</u>	<u>LABORER</u>	<u>4</u>							<u>4</u>	<u>24.75</u>	<u>99.00</u>		
<u>DON PULK</u>	<u>LABORER</u>	<u>2</u>							<u>2</u>	<u>25.93</u>	<u>51.86</u>		
<u>ROY WASHINGTON</u>	<u>FOREMAN</u>	<u>2</u>							<u>2</u>	<u>26.54</u>	<u>53.08</u>		
									<u>SUB-TOTAL</u>		<u>401.94</u>		
<u>FORD F150 3/4T P/GAS</u>		<u>8</u>							<u>8</u>	<u>13.53</u>	<u>108.24</u>		
<u>LINCOLN 225 WELDER</u>		<u>6</u>							<u>6</u>	<u>4.86</u>	<u>29.16</u>		
<u>INGERSOLL 375 COMPRESSOR</u>		<u>3</u>							<u>3</u>	<u>31.50</u>	<u>94.74</u>		
<u>POGO STICK</u>		<u>1</u>							<u>1</u>	<u>3.00</u>	<u>3.00</u>		
									<u>SUB-TOTAL</u>		<u>235.14</u>		
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.											<b>Total</b>	<u>637.08</u>	

**STATEMENT OF BILLS FOR MATERIALS AND FREIGHT**

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

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 \_\_\_\_\_



FORCE ACCOUNT STATEMENT

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

C. S. ID. - Job No. FOX CREEK

Fed. Item No. Year Route No.

Fed. No. MANPOWER & EQUIPMENT

Length and Type of Work 14684 KLENK

To Accompany Recommendation No. Date

Contractor O'LAUGHLIN
Address

PAYROLL AND EQUIPMENT RENTAL

Date-Month of AUGUST 19

Table with columns: Name of Employee, Class of Work, Total Hours, Rate, Amount, Credit Time. Includes entries for PAT MCKEON, DON PULK, AL MATTISON, CYNTHIA GREER, LINCOLN ZZS, FORD F150 3/4T PLUGAS.

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

Total 387.19

STATEMENT OF BILLS FOR MATERIALS AND FREIGHT

Table with columns: 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.

Contractor signature and name

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. \_\_\_\_\_

MANPOWER & EQUIPMENT

Length and Type of Work 14084 KLEUK

To Accompany Recommendation No. \_\_\_\_\_ Date \_\_\_\_\_

Contractor O'LAUGHLIN CONST CO.  
Address \_\_\_\_\_

PAYROLL AND EQUIPMENT RENTAL

Date—Month of JULY 19\_\_\_\_\_

Name of Employee	Class of Work							Total Hours	Rate	Amount	Credit Time	
ARVIL WRIGHT	LABORER				31			7	24.75	198.00		
CYNTHIA GREER	OPERATOR				4			4	19.59	78.36		
DON PULK	LABORER				5			5	25.93	129.65		
ROY WASHINGTON	FOREMAN				3			3	26.54	79.62		
									SUB-TOTAL	485.63		
LINCOLN 225 WELDER												
									4	4.86	19.94	
FORD F-150 3/4T P/U GAS												
									6	13.53	81.18	
CHEV 3/4T P/U DIESEL												
									3	8.89	26.67	
									SUB-TOTAL	127.79		

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

Total 613.42

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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[Signature] Contractor

Checked by \_\_\_\_\_ Resident or Project Engineer

Approved by \_\_\_\_\_ District Engineer

Date \_\_\_\_\_



**FORCE ACCOUNT STATEMENT**

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C. S. ID. - Job No. \_\_\_\_\_

Fed. Item No. \_\_\_\_\_

Year \_\_\_\_\_

Route No. \_\_\_\_\_

Fed. No. \_\_\_\_\_

MANPOWER & EQUIPMENT

Length and Type of Work \_\_\_\_\_

14684 KLENK

To Accompany Recommendation No. \_\_\_\_\_

Date \_\_\_\_\_

Contractor O'LAUGHLIN CONST CO.

Address \_\_\_\_\_

**PAYROLL AND EQUIPMENT RENTAL**

Date—Month of JULY

19\_\_\_\_

Name of Employee	Class of Work		Date			Total Hours	Rate	Amount	Credit Time	
		30								
<u>AL MATTISON</u>		<u>4</u>				<u>4</u>	<u>24.75</u>	<u>198.00</u>		
<u>JERRY CHILDRRESS</u>		<u>4</u>				<u>4</u>	<u>24.75</u>	<u>198.00</u>		
<u>ARVIL WRIGHT</u>		<u>6</u>				<u>6</u>	<u>24.75</u>	<u>148.50</u>		
<u>ROY WASHINGTON</u>		<u>4</u>				<u>4</u>	<u>26.54</u>	<u>106.16</u>		
<u>SUB-TOTAL</u>								<u>650.66</u>		
<u>INGERSOL 375 COMPRESSOR</u>		<u>3</u>				<u>3</u>	<u>31.58</u>	<u>94.74</u>		
<u>90LB BREAKER</u>		<u>3</u>				<u>3</u>	<u>2.31</u>	<u>6.93</u>		
<u>FORD F150 3/4T P/U GAS</u>		<u>6</u>				<u>6</u>	<u>13.53</u>	<u>81.18</u>		
<u>LINCOLN 225 WELDER</u>		<u>4</u>				<u>4</u>	<u>4.86</u>	<u>19.44</u>		
<u>CHEV 3/4T P/U DIESEL</u>		<u>4</u>				<u>4</u>	<u>8.89</u>	<u>35.56</u>		
<u>SUB-TOTAL</u>								<u>237.85</u>		
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.								<b>Total</b>	<u>888.51</u>	

**STATEMENT OF BILLS FOR MATERIALS AND FREIGHT**

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

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D.P. / R.L. Bogach  
Contractor

Checked by \_\_\_\_\_ Approved by \_\_\_\_\_ Date \_\_\_\_\_  
Resident or Project Engineer District Engineer





1101 (7/84)

### FORCE ACCOUNT STATEMENT

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FILE 104

C. S. ID. - Job No. \_\_\_\_\_

Fed. Item No. \_\_\_\_\_ Year \_\_\_\_\_ Route No. \_\_\_\_\_

Fed. No. 14684 KLENK

Length and Type of Work restore fence

To Accompany Recommendation No. \_\_\_\_\_ Date \_\_\_\_\_

Contractor O'LAUGHLIN CONST CO.

Address \_\_\_\_\_

PAYROLL AND EQUIPMENT RENTAL		Date—Month of <u>AUGUST</u> 19____						Total Hours	Rate	Amount	Credit Time
Name of Employee	Class of Work	25									
<u>AL MATTISON</u>	<u>LABORER</u>	<u>2</u>					<u>2</u>	<u>24.75</u>	<u>49.50</u>		
<u>PAT MCKEON</u>	<u>LABORER</u>	<u>2</u>					<u>2</u>	<u>18.83</u>	<u>37.66</u>		
<u>SUB TOTAL</u>									<u>87.16</u>		
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.									<u>87.16</u>		

#### STATEMENT OF BILLS FOR MATERIALS AND FREIGHT

Date	Purchased from	Item	Amount	Date of Payment
	<u>replace fence</u>			
Total				

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Checked by \_\_\_\_\_ Approved by \_\_\_\_\_ Contractor \_\_\_\_\_ Date \_\_\_\_\_  
Resident or Project Engineer District Engineer

# Fox Creek Flood Control 1986

14684 KLENK

MANPOWER EQUIPMENT MAT'L

	MANPOWER	EQUIPMENT	MAT'L	
7-28	712 84	234 65		
29	709 52	248 19		
30	650 66	237 85		
31	485 63	127.79		
8-1	313 63	73 56		
May 27 thru Aug 1	2872.28	922 04		
8-4	401 94	235 14		
5	301 72	120.06	703.66	355 20
25	87 16	-		
August 18 thru Sept 4	87 16	-		
TOTAL	3663 10	1277 24		

Sheet piling 28.5 feet near west property line.

86-22-28  
STEEL SHEETING LOCATION  
# 14684 KLENK  
8/13/86  
J. DREWS P.C.

14660 KLENK  
14668  
14674  
14684

General Note

Job Number

Date

KLENK

