



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. _____

Length and Type of Work EQUIPMENT FOR 14715 KLENK

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>MAY</u> 19 <u>86</u>				Total Hours	Rate	Amount	Credit Time
Name of Employee	Class of Work								
<u>BOBCAT 843 WITH BACKHOE</u>				<u>29</u>		<u>9.0</u>	<u>33.81</u>	<u>304.29</u>	
<u>GMC 3/4 TON DIESEL PICKUP</u>				<u>2.0</u>		<u>2.0</u>	<u>8.89</u>	<u>17.78</u>	
<u>SUB-TOTAL</u>								<u>322.07</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. B... ..
Contractor

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



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 record charges on force account work performed.*

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C. S. ID. - Job No. _____

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

Fed. No. _____

Length and Type of Work EQUIPMENT FOR
14715 KLENK

To Accompany Recommendation No. _____ Date _____

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

PAYROLL AND EQUIPMENT RENTAL		Date—Month of						1986		Amount	Credit Time
Name of Employee	Class of Work							Total Hours	Rate		
BOBCAT 843 WITH BACKHOE		28						10.0	33.81	338.10	
GMC BOOM TRUCK								3.0	41.27	123.81	
LINCOLN 225 WELDER								4.0	4.86	19.44	
SUMP PUMP WITH 3" DISCHARGE								4.0	7.41	29.64	
GMC 3/4 TON DIESEL PICKUP								2.0	8.89	17.78	
SUB-TOTAL										528.77	
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. Bryant
 Contractor

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



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

Fed. No. _____

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

Length and Type of Work MANPOWER FOR 14715 KLENK

To Accompany Recommendation No. _____ Date _____

PAYROLL AND EQUIPMENT RENTAL		Date—Month of						19 <u>86</u>		Amount	Credit Time
Name of Employee	Class of Work						Total Hours	Rate			
PATRICK McCUE	SUPERINTENDENT					28	2.0	35.00	70.00		
							2.0	35.33	70.66		
GORDON PENNER	FOREMAN					8.0	8.0	23.55	188.40		
ARNIL WRIGHT	LABORER					3.0	3.0	21.43	64.29		
							2.0	33.81	67.62		
CYNTHIA GRIER	OPERATOR					8.0	8.0	22.54	180.32		
EINO KORPI	LABORER					3.0	3.0	21.43	64.29		
SUB-TOTAL									705.58		
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. [Signature]
Contractor

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



1101 (7/84)

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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 EQUIPMENT FOR 14715 KLENK

To Accompany Recommendation No. _____ Date _____

PAYROLL AND EQUIPMENT RENTAL

Date—Month of MAY 1986

Name of Employee	Class of Work	Date	Month	Year			Total Hours	Rate	Amount	Credit Time
FORD F9000 TRACTOR		27					3.0	53.90	161.70	
ROGERS LOW-BOY		3.0					3.0	20.28	60.84	
BOBCAT 843 WITH BACKHOE		3.0					3.0	33.81	101.43	
SUB-TOTAL									323.97	
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 _____



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

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Length and Type of Work EQUIPMENT FOR 14715 KLENIC

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>MAY</u> 19 <u>86</u>						Total Hours	Rate	Amount	Credit Time
Name of Employee	Class of Work										
FORD F9000 TRACTOR		27					3.0	53.90	161.70		
ROGERS LOW-BOY							3.0	20.28	60.84		
BOBCAT 843 WITH BACKHOE							3.0	33.81	101.43		
SUB-TOTAL										323.97	
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
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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 _____



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

Fed. No. _____

Length and Type of Work MANPOWER FOR 14715 KLENK

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
Name of Employee	Class of Work	27									
GORDON PENNER	FOREMAN	8.0						8.0	23.55	188.40	
ARVIL WRIGHT	LABORER	8.0						8.0	21.43	171.44	
CYNTHIA GRIER	OPERATOR	8.0						8.0	22.54	180.32	
JERRY SHUTE	WAREHOUSE/YARD	3.0						3.0	22.89	68.67	
SUB-TOTAL										608.83	
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.										Total	

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A. L. [Signature]
Contractor

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

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EQUIPMENT FOR

Length and Type of Work 14715 KLENK

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		<u>28</u>			Total Hours	Rate		
<u>BOBCAT 843 WITH BACKHOE</u>			<u>10.0</u>			<u>10.0</u>	<u>33.81</u>	<u>338.10</u>	
<u>GMC BOOM TRUCK</u>			<u>3.0</u>			<u>3.0</u>	<u>41.27</u>	<u>123.81</u>	
<u>LINCOLN 225 WELDER</u>			<u>4.0</u>			<u>4.0</u>	<u>4.86</u>	<u>19.44</u>	
<u>SUMP PUMP WITH 3" DISCHARGE</u>			<u>4.0</u>			<u>4.0</u>	<u>7.41</u>	<u>29.64</u>	
<u>GMC 3/4 TON DIESEL PICKUP</u>			<u>2.0</u>			<u>2.0</u>	<u>8.89</u>	<u>17.78</u>	
<u>SUB-TOTAL</u>								<u>528.77</u>	
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.								Total	

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R. F. Coyne
Contractor

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PAYROLL AND EQUIPMENT RENTAL		Date—Month of				19 <u>86</u>		Amount	Credit Time
Name of Employee	Class of Work				Total Hours	Rate			
BOBCAT 843 WITH BACKHOE				29	9.0	33.81	304.29		
GMC 3/4 TON DIESEL PICKUP					2.0	8.89	17.78		
SUB-TOTAL								322.07	
Itemize % of Workmen's Comp., Old Age Pension, Social Security, Unemployment Compensation, Public Liability and Property Damage.								Total	

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R. L. Equity
Contractor

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

Fox Creek Flood Control 1986

May 27 thru Aug 1

14715 KLENK

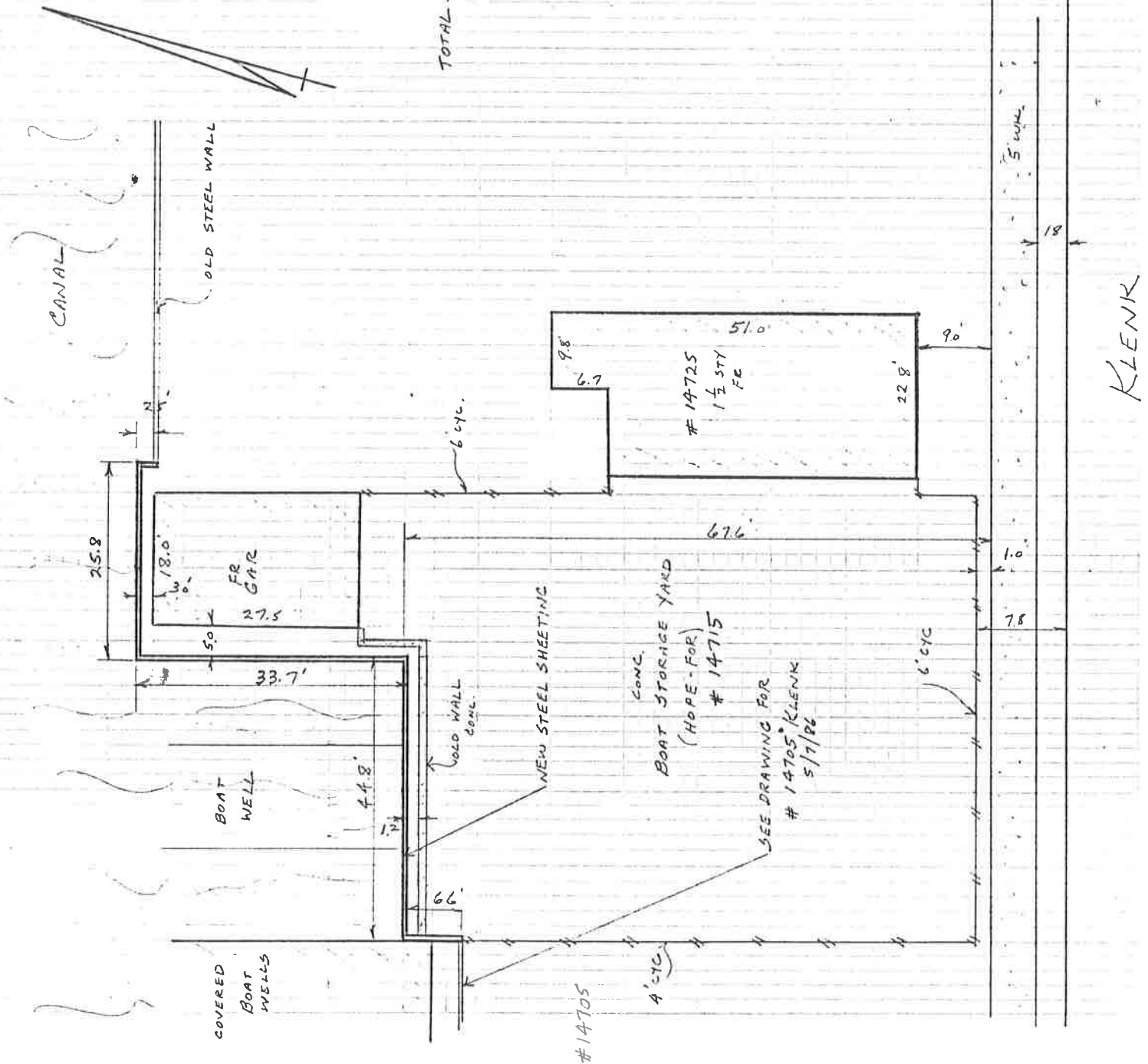
Manpower Equipment Material

excavate	5-27	608.83	323.97
replace / day fill	28	705.58	528.77
	29	507.86	322.07
May 27 to Aug 1		1822.27	1174.81

Sheet piling 113.4 feet tied to west

86-22-28
 STEEL SHEETING LOCATION
 # 14715 KLENK
 3/5/87
 J. DREWS PC

TOTAL STEEL SHEETING
 • 113.4 (NO CAP)



KLENK