

PK Contracting, Inc.
1965 Barrett, Troy, MI 48084

Period: 11/08/2020 - 11/14/2020

Number Of Weeks: 21

Contract: 191489- AJAX VARIOUS CITY DETROIT

State Job No.: pw205935 Control Section: 82000

Prime: 3 AJAX PAVING IND., INC.

Certified Payroll Transcript

-----Hours-----												***** Liabilities *****			***** Weekly Totals ***** (Week Ending 11/14/20)			
Employee		Sun	Mon	Tue	Wed	Thu	Fri	Sat	Total	Rate	Project Amounts	Ttl Wkly Hrs Wk All Jobs	Description	Rate	Amounts	Gross	Deductions	Net Pay
CAMPBELL, DAVID LEO																		
	Overtime	0.00	0.00	0.00	0.00	0.00	3.25	0.00	3.25	34.760	112.97	65.25	FICA - EMPLOYEF	0.0620	9.59	Fed W/H	437.01	
Soc Sec: xxx-xx-9955	Fringe	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12.850	41.76		MEDICARE - EMPI	0.0145	2.25	F.I.C.A	146.84	
M/EX: S/O											0.00		WORKERS COMP	0.0209	2.44	MEDICARE	34.34	
24764 GREENBRIAR AVE.											0.00		GENERAL LIABIL'	0.0059	0.68	MI STATE TAX W/	100.66	
EASTPOINTE, MI 48021											154.73				14.96	Additional Medicar		
																2,368.36	718.85	1,649.51
Race/Sex: W/M												65.25						
SUMI2002-001005/01/2002 Zone-1																		
Pavement Marker - Group 2																		
Occup Catg: LABORER - Laborer, Semi-skilled																		
Check #: 201120101																		
JANSZ II, RAGGY JAMES																		
	Overtime	0.00	0.00	0.00	0.00	0.00	3.25	0.00	3.25	38.610	125.48	69.00	FICA - EMPLOYEF	0.0620	10.37	Fed W/H	469.39	
Soc Sec: xxx-xx-8195	Fringe	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12.850	41.76		MEDICARE - EMPI	0.0145	2.43	F.I.C.A	160.00	
M/EX: S/O											0.00		WORKERS COMP	0.0209	2.62	MEDICARE	37.42	
4036 HILL DR. APT. 102											0.00		GENERAL LIABIL'	0.0059	0.73	MI STATE TAX W/	106.39	
SHELBY TOWNSHIP, MI 48317											167.24				16.15	Additional Medicar		
																2,580.69	880.62	1,700.07
Race/Sex: W/M												69.00						
SUMI2002-001005/01/2002 Zone-1																		
Pavement Marker - Group 1																		
Occup Catg: LABORER - Laborer, Semi-skilled																		
Check #: 201120101																		
LUPRO, JORDAN ERIC																		
	Regular Time	2.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00	23.170	46.34	40.50	FICA - EMPLOYEF	0.0620	4.46	Fed W/H	132.08	
Soc Sec: xxx-xx-2084	Fringe	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12.850	25.70		MEDICARE - EMPI	0.0145	1.04	F.I.C.A	64.57	
M/EX: S/O											0.00		WORKERS COMP	0.0209	1.51	MEDICARE	15.10	
16204 MAY											0.00		GENERAL LIABIL'	0.0059	0.42	MI STATE TAX W/	44.26	
ALLEN PARK, MI 48101											72.04				7.43	Additional Medicar		
																1,041.43	256.01	785.42
Race/Sex: W/M												40.50						
SUMI2002-001005/01/2002 Zone-1																		
Pavement Marker - Group 2																		
Occup Catg: LABORER - Laborer, Semi-skilled																		
Check #: 201120101																		

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-----Hours-----												***** Liabilities *****			***** Weekly Totals ***** (Week Ending 11/14/20)		
Employee	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Total	Rate	Project Amounts	Ttl Wkly Hrs Wk All Jobs	Description	Rate	Amounts	Gross	Deductions	Net Pay
MATHEWS, DENNY EDWARD																	
Regular Time	2.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00	23.170	46.34		FICA - EMPLOYEF	0.0620	4.46	Fed W/H	209.38	
Soc Sec: xxx-xx-4360	Fringe	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12.850	25.70		MEDICARE - EMPI	0.0145	1.04	F.I.C.A	107.94	
M/EX: S/O										0.00		WORKERS COMP	0.0209	1.51	MEDICARE	25.25	
1055 SEABURY DR.										0.00		GENERAL LIABILI	0.0059	0.42	MI STATE TAX W/	59.20	
LAKE ORION, MI 48362														7.43	Additional Medicar		
										72.04					401(k) percentage	348.21	
											53.50				1,741.04	749.98	991.06
Race/Sex: W/M																	
SUMI2002-001005/01/2002 Zone-1																	
Pavement Marker - Group 2																	
Occup Catg: LABORER - Laborer, Semi-skilled																	
Check #: 201120101																	
VANLUVEN, ALEX STEVENS																	
Regular Time	0.00	0.00	0.00	0.00	0.00	3.25	0.00	3.25	23.170	75.30		FICA - EMPLOYEF	0.0620	7.26	Fed W/H	305.54	
Soc Sec: xxx-xx-2845	Fringe	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12.850	41.76		MEDICARE - EMPI	0.0145	1.70	F.I.C.A	112.88	
M/EX: S/O										0.00		WORKERS COMP	0.0209	2.44	MEDICARE	26.40	
6569 STRATFORD DR.										0.00		GENERAL LIABILI	0.0059	0.68	MI STATE TAX W/	77.37	
HOLLY, MI 48442														12.08	Additional Medicar		
										117.06					1,820.57	522.19	1,298.38
											52.25						
Race/Sex: W/M																	
SUMI2002-001005/01/2002 Zone-1																	
Pavement Marker - Group 2																	
Occup Catg: LABORER - Laborer, Semi-skilled																	
Check #: 201120101																	

Date 11/18/2020

I, Renee Caldwell Payroll Administrator
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

PK Contracting, Inc. on the
(Contractor or Subcontractor)

Job: 191489- AJAX VARIOUS CITY DETROIT ; that during the payroll period commencing on the
State Job: pw205935 (Building or Work)

8 day of November, 2020, and ending the 14 day of November 2020
all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

PK Contracting, Inc.
(Contractor or Subcontractor)

from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. §3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED
PLANS, FUNDS, OR PROGRAMS

☐ - In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION
REMARKS: Some employees receive Health Insurance benefits. Please reference the provided Fringe Benefit Breakdown sheet.	

NAME AND TITLE Renee Caldwell Payroll Administrator	SIGNATURE Renee Caldwell Renee Caldwell Nov 18 2020 2:26 PM
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	