

In accordance with Connecticut General Statutes, 31-53  
 Certified Payrolls with a statement of compliance  
 shall be submitted monthly to the contracting agency.

**PAYROLL CERTIFICATION FOR PUBLIC WORKS PROJECTS**

Connecticut Department of Labor  
 Wage and Workplace Standards Division  
 200 Folly Brook Blvd.  
 Wethersfield, CT 06109

**WEEKLY PAYROLL**

CONTRACTOR NAME AND ADDRESS:				SUBCONTRACTOR NAME & ADDRESS							WORKER'S COMPENSATION INSURANCE CARRIER									
Jewel Corporation 91 President Ave. Boston, MA 07824				Tom Smith Contractor 1 South First Street Hartford, CT 06114							AIG POLICY # WC 9494544 EFFECTIVE DATE: 10/31/2007 EXPIRATION DATE: 10/31/2008									
PAYROLL NUMBER	Week-Ending Date	PROJECT NAME & ADDRESS								S-TIME	BASE HOURLY RATE	TYPE OF FRINGE BENEFITS	GROSS PAY FOR ALL WORK PERFORMED THIS WEEK	TOTAL DEDUCTIONS				GROSS PAY FOR THIS PREVAILING RATE JOB	CHECK # AND NET PAY	
		PERSON/WORKER AND ADDRESS	APPR RATE %	MALE/FEMALE AND RACE	WORK CLASSIFICATION	DAY AND DATE								O-TIME	Per Hour	FICA	WITH-HOLDING			STATE
41	12/23/2007	Jewel Osco Store 293 Pathweaver Road Hartford, CT 06118										1 through 6								
		TRADE LICENSES		HOURS WORKED EACH DAY								TOTAL FRINGE BENEFIT PLAN CASH								
		TYPE & NUMBER		S	M	T	W	TH	F	S										
				12/17	12/18	12/19	12/20	12/21	12/22	12/23										
Smith, Walter 1S251 Northwest Highway New Haven, CT 06513		M	Laborer	-	8.00	8.00	8.00	8.00	8.00	-	40.00	\$ 13.82	1. \$ 6.79	552.80	42.29	26.82	-	-	552.80	# 11753 439.13
													2. \$ 5.85							
													3. \$ 0.00							
													4. \$ 0.00							
													5. \$ 0.00							
													6. \$ 1.02							
Jones, Ed 15 South First Stamford, CT 06902		M	Mason	-	-	-	8.00	5.00	8.00	-	21.00	\$ 30.50	1. \$ 7.76	640.50	49.00	29.05	-	-	640.50	# 11784 538.82
													2. \$ 10.13							
													3. \$ 0.00							
													4. \$ 0.00							
													5. \$ 0.00							
													6. \$ 1.64							
Hammerschmidt, Samuel 296 E. Van Buren Naugatuck, CT 06770	90	M	Mason	-	-	-	8.00	8.00	8.00	-	24.00	\$ 19.83	1. \$ 7.76	475.92	36.41	46.75	-	-	475.92	# 11783 384.79
													2. \$ 10.13							
													3. \$ 0.00							
													4. \$ 0.00							
													5. \$ 0.00							
													6. \$ 1.64							
Franklin, Thomas 45 Chesterton New Haven, CT 06519		M	Laborer	-	8.00	-	8.00	8.00	-	-	24.00	\$ 28.53	1. \$ 6.79	684.72	52.38	91.89	-	-	684.72	# 11776 463.10
													2. \$ 5.85							
													3. \$ 0.00							
													4. \$ 0.00							
													5. \$ 0.00							
													6. \$ 1.02							

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		TRADE LICENSES TYPE & NUMBER	DAY AND DATE										O-TIME	FICA MEDI	FEDERAL WITH-HOLDING	STATE WITH-HOLDING			OTHER
PERSON/WORKER AND ADDRESS	APPR RATE %	MALE/FEMALE AND RACE	WORK CLASSIFICATION	S	M	T	W	TH	F	S		Per Hour 1 through 6							
				HOURS WORKED EACH DAY															
Martinez, Jose 16 Oberwise Ct.  New Haven, CT 06513		M  Asian	Laborer	-	8.00	8.00	8.00	8.00	-	-	32.00	1. \$ 6.79	752.00	57.52	108.71	-	-	752.00	# 11551 532.03
				2. \$ 5.85															
				3. \$ 0.00															
				4. \$ 0.00															
				5. \$ 0.00															
				6. \$ 1.02															
Butterfield, Lawrence 22 Forest Drive Trail  New Britain, CT 06053		M  Caucasian	Mason	-	-	-	8.00	8.00	8.00	-	24.00	1. \$ 7.76	774.00	59.21	78.26	-	-	774.00	# 11785 636.53
				2. \$ 10.13															
				3. \$ 0.00															
				4. \$ 0.00															
				5. \$ 0.00															
				6. \$ 1.64															
				-	-	-	-	-	-	0.00	1. \$								
				2. \$															
				3. \$															
				4. \$															
				5. \$															
				6. \$															
				-	-	-	-	-	-	0.00	1. \$								
				2. \$															
				3. \$															
				4. \$															
				5. \$															
				6. \$															

**\*FRINGE BENEFITS EXPLANATION (P):**

Bona fide benefits paid to approved plans, funds or programs, except those required by Federal or State Law (unemployment tax, worker=s compensation, income taxes, etc.)

Please specify the type of benefits provided:

- 1) Medical or hospital care Health
- 2) Pension or retirement Pension / Annuity
- 3) Life Insurance
- 4) Disability
- 5) Vacation, holiday
- 6) Other (please specify) Other

**CERTIFIED STATEMENT OF COMPLIANCE**

For the week ending date of 12/23/2007,

I, Tom Smith of Tom Smith Contractor, (hereafter known as Employer)

in my capacity as President (title) do hereby certify and state:

All persons employed on said project have been paid the full weekly wages earned by them during the week in accordance with Connecticut General Statutes, section 31-53, as amended. Further, I hereby certify and state the following:

- A) The records submitted are true and accurate;
- B) The rate of wages paid to each mechanic, laborer or workman and the amount of payment or contributions paid or payable on behalf of each such employee to any employee welfare fund, as defined in Connecticut General Statutes, section 31-53 (h), are not less than the prevailing rate of wages and the amount of payment or contributions paid or payable on behalf of each such employee to any employee welfare fund, as determined by the Labor Commissioner pursuant to subsection Connecticut General Statutes, section 31-53 (d), and said wages and benefits are not less than those which may also be required by contract;
- C) The Employer has complied with all of the provisions in Connecticut General Statutes, section 31-53 (and Section 31-54 if applicable for state highway construction);
- D) Each such employee of the Employer is covered by a worker=s compensation insurance policy for the duration of his employment which proof of coverage has been provided to the contracting agency;
- E) The Employer does not receive kickbacks, which means any money, fee, commission, credit, gift, gratuity, thing of value, or compensation of any kind which is provided directly or indirectly, to any prime contractor, prime contractor employee, subcontractor, or subcontractor employee for the purpose of improperly obtaining or rewarding favorable treatment in connection with a prime contract or in connection with a prime contractor in connection with a subcontractor relating to a prime contractor; and
- F) The Employer is aware that filing a certified payroll which he knows to be false is a class D felony for which the employer may be fined up to five thousand dollars, imprisoned for up to five years or both.

Submitted on

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Title)