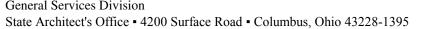
Certified Payroll Report

Ohio Department of Administrative Services General Services Division



Ohio AS www.ohio.gov/sao e: StateArchOff@das.state.oh.us ⁷: 614.466.4761 • f: 614.644.7982

Report for: Company ¹					☐ Check if Subcontractor ¹ Contractor Name							Contract No. P							Payroll No.			
Address City, State, Zip Phone No.					Public Authority (Owner)							Project Name & Location W							Veek Ending			
																		s	heet ²		of	
Employee Name, Address, Social Security Number ³	Work Class ³	Race/ Sex ³		Но							Total Hours		Fringes: Cash Approved P Cash & Approved Plans				Plans		Deductions			
				s	М	Т	W		F	S			Fringes Rate Per Hour					I	With.	Soc.	Other	
												T	H&W	Pens	Vac	App.	Other	Total	Tax	Sec.	(list)	Net Pay
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By signing below, I certify that: prevailing wage rate for the cla other than permissable deducti any of the above statements m	ss of work do ons as define	ne; (3) thed in ORC	e fring Chap	je ben oter 41	iefits h 115; ai	nave b	een pa appre	aid as ntices	indica are re	ted at	oove; (4) red with the	no rebates	s or dedu	ictions ha	ve been	or will be	made, dir	rectly or i	ndirectly f	from the	total wage	s earned,
Type or Print Name and Title											Signa	ature							Date			