



October 28, 2025

Draw No.: 3  
Invoice No.: 210300-23C  
Bear Job No.: 210300-23

Board of Education, Crete-Monee School District #20  
690 W. Exchange Street  
Crete, IL 60417  
Attn: Accounts Payable

RE: Crete SD#201-U, Middle School -  
Auditorium Demo at 635  
Olmstead Lane, University Park, IL

## INVOICE

Concerning the work completed to date, our billing is as follows:

Original Contract Amount	\$327,493.00
Change Orders Approved to Date	<u>\$-20,938.00</u>
Current Contract Amount	\$306,555.00

Work Completed to Date	\$306,555.00
Less: Retainage	(\$0.00)
Less: Previously Invoiced	<u>(\$237,151.38)</u>

<b>TOTAL AMOUNT DUE THIS INVOICE</b>	<b>\$69,403.62</b>
--------------------------------------	--------------------

Thank you,

BEAR Construction Company

# APPLICATION AND CERTIFICATE FOR PAYMENT

**To Owner:** Crete-Monee School District 201U  
c/o Board of Education, Crete-Monee School District #201-U  
690 W. Exchange Street  
Crete, IL 60417  
Attn: Accounts Payable

**Project:** Crete SD#201-U, Middle School -  
Auditorium Demo

**Application No. :** 3

**Job No.:** 210300-23

**Address:** 635 Olmstead Lane, University Park,  
IL

**Invoice No.:** 210300-23C

**Period To:** 10/28/2025

**Distribution to :**

<input type="checkbox"/>	Architect
<input type="checkbox"/>	Contract
<input type="checkbox"/>	
<input type="checkbox"/>	

**From Contractor:** Bear Construction Company

1501 Rohlwing Road, Rolling Meadows, IL 60008

**Architect:** ARCON Associates, Inc.

**Architect Project No.:**

**Customer Project No.:**

## CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract.

1. Original Contract Sum .....	\$327,493.00
2. Net Change By Change Order .....	-\$20,938.00
3. Contract Sum To Date .....	\$306,555.00
4. Total Completed and Stored To Date .....	\$306,555.00
5. Retainage:	
a. <u>0.00%</u> of Completed Work .....	\$0.00
b. <u>0.00%</u> of Stored Material .....	\$0.00
Total Retainage .....	\$0.00
6. Total Earned Less Retainage .....	\$306,555.00
7. Less Previous Certificates For Payments .....	\$237,151.38
8. Current Payment Due .....	\$69,403.62
9. Balance To Finish, Plus Retainage .....	\$0.00

CHANGE ORDER SUMMARY	Additions	Deductions
Total changes approved in previous months by Owner	\$75.00	\$0.00
Total Approved this Month	\$0.00	\$21,013.00
TOTALS	\$75.00	\$21,013.00
NET CHANGES by Change Order	-\$20,938.00	

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information, and belief, the work covered by this Application for Payment has been completed in accordance with the Contract Documents. That all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

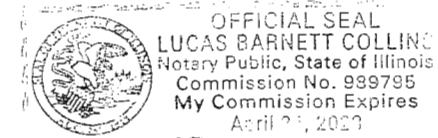
**CONTRACTOR:** Bear Construction Company

By: James S. Wienold Date: 10/28/2025  
James S. Wienold, Chief Executive Officer

State of: **Illinois**  
County of: **Cook**

Subscribed and sworn to before me this  
28th day of **October**, 2025

Notary Public: Lucas Barnett Colling  
My Commission expires: April 21, 2027



## ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information, and belief, the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

**AMOUNT CERTIFIED** ..... **\$69,403.62**

(Attach explanation if amount certified differs from the amount applied. Initial all figures on this Application and on the Continuation Sheet that are changed to conform with the amount certified.)

**ARCHITECT:**

By: \_\_\_\_\_ Date: \_\_\_\_\_

This Certificate is not negotiable. The **AMOUNT CERTIFIED** is payable only to the Contractor named herein. Issuance, payment, and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

# CONTINUATION SHEET

## Application and Certification for Payment,

containing Contractor's signed certification is attached.

In tabulations below, amounts are stated to the nearest dollar.

Use Column I on Contracts where variable retainage for line items may apply.

Application No.: 3

Application Date: 10/28/25

Period To: 10/28/25

Invoice #: 210300-23C

Contract: 210300-23 Crete SD#201-U, Middle School - Auditorium Demo

Architect's Project No.:

A Item No.	B		C	D		E	F	G		H	I
	Contractor / Subcontractor Name	Description of Work	Scheduled Value	Work Completed			Materials Presently Stored (Not in D or E)	Total Completed & Stored to Date (D+E+F)	% (G / C)	Balance To Finish (C-G)	Retainage
				From Previous Application (D+E)	This Period In Place						
1	Bear Construction Company	Mobilization	700.00	700.00	0.00		0.00	700.00	100.00%	0.00	0.00
2	Bear Construction Company	General Conditions	52,687.00	52,687.00	0.00		0.00	52,687.00	100.00%	0.00	0.00
3	Bear Construction Company	Payment & Performance Bond	4,715.00	4,715.00	0.00		0.00	4,715.00	100.00%	0.00	0.00
4	Bear Construction Company	Insurance	3,274.18	3,274.18	0.00		0.00	3,274.18	100.00%	0.00	0.00
5	Bear Construction Company	OH&P	32,816.82	32,816.82	0.00		0.00	32,816.82	100.00%	0.00	0.00
6	Bear Construction Company	BEAR Carpentry Labor	36,275.00	36,275.00	0.00		0.00	36,275.00	100.00%	0.00	0.00
7	Bear Construction Company	BEAR Materials	20,000.00	20,000.00	0.00		0.00	20,000.00	100.00%	0.00	0.00
8	Bear Construction Company	Owners Allowance	0.00	0.00	0.00		0.00	0.00	0.00%	0.00	0.00
9	Bear Construction Company	Electrical	5,500.00	5,500.00	0.00		0.00	5,500.00	100.00%	0.00	0.00
10	Alliance Concrete Sawing and Drilling IV, LLC	Demolition	135,000.00	90,000.00	45,000.00		0.00	135,000.00	100.00%	0.00	0.00
11	To Be Determined	Painting and Coating	0.00	0.00	0.00		0.00	0.00	0.00%	0.00	0.00
12	To Be Determined	Fire Suppression	0.00	0.00	0.00		0.00	0.00	0.00%	0.00	0.00
13	Warren F. Thomas Plumbing Company	Plumbing	562.00	562.00	0.00		0.00	562.00	100.00%	0.00	0.00
14	To Be Determined	HVAC	0.00	0.00	0.00		0.00	0.00	0.00%	0.00	0.00
15	To Be Determined	Electrical	0.00	0.00	0.00		0.00	0.00	0.00%	0.00	0.00
16	Lankford Construction Co.	Rough Carpentry	15,025.00	15,025.00	0.00		0.00	15,025.00	100.00%	0.00	0.00
Grand Totals			306,555.00	261,555.00	45,000.00		0.00	306,555.00	100.00%	0.00	0.00

## Sworn Statement for Contractor and Subcontractor To Owner

Contractor: **Bear Construction Company**  
1501 Rohiwing Road  
Rolling Meadows, IL 60008

Customer: **Board of Education, Crete-Monee School District #201-U**  
Owner: **Crete-Monee School District 201U**

Application Date: **10/28/2025**  
Application No.: **3**  
Project No.: **210300-23**  
Invoice No.: **210300-23C**

Project: **Crete SD#201-U, Middle School - Auditorium Demo**

Address: **635 Olmstead Lane, University Park, IL**

Contractor or Vendor	Contract Amount	Work Completed	Total Retained	Previously Requested	Net Amount Requested	Balance To Become Due
<b>Bear Construction Company</b>						
Mobilization	700.00	700.00	0.00	700.00	0.00	0.00
General Conditions	52,687.00	52,687.00	0.00	47,418.30	5,268.70	0.00
Payment & Performance Bond	4,715.00	4,715.00	0.00	4,243.50	471.50	0.00
Insurance	3,274.18	3,274.18	0.00	2,946.76	327.42	0.00
OH&P	32,816.82	32,816.82	0.00	29,658.32	3,158.50	0.00
BEAR Carpentry Labor	36,275.00	36,275.00	0.00	32,647.50	3,627.50	0.00
BEAR Materials	20,000.00	20,000.00	0.00	18,000.00	2,000.00	0.00
Owners Allowance	0.00	0.00	0.00	0.00	0.00	0.00
Electrical	5,500.00	5,500.00	0.00	4,950.00	550.00	0.00
<b>Demolition</b>						
Alliance Concrete Sawing and Drilling IV, LLC 570 Rock Road Drive Suite N East Dundee, IL 60118 (847) 783-6585 wslowiak@alliancesawing.com	135,000.00	135,000.00	0.00	81,000.00	54,000.00	0.00
<b>Plumbing</b>						
Warren F. Thomas Plumbing Company 475 Quadrangle Drive, Suite A Bolingbrook, IL 60440 (630) 435-0636 stefanie@warrenthomasplbg.com	562.00	562.00	0.00	562.00	0.00	0.00
<b>Rough Carpentry</b>						
Lankford Construction Co. 1455 Karlens Way Johnsburg, IL 60051 (847) 497-0800 kschmidt@lcco.com; dpollard@lcco.com	15,025.00	15,025.00	0.00	15,025.00	0.00	0.00
<b>Totals</b>	<b>306,555.00</b>	<b>306,555.00</b>	<b>0.00</b>	<b>237,151.38</b>	<b>69,403.62</b>	<b>0.00</b>

Amount of Original Contract	327,493.00
Extras to Contract	75.00
Total Contract and Extras	327,568.00
Credits to Contract	-21,013.00
<b>Adjusted Total Contract</b>	<b>306,555.00</b>

Completed & Stored to Date	306,555.00
Total Retained by Owner	0.00
Net Amount Earned	306,555.00
Previously Requested	237,151.38
<b>Net Amount Due This Payment</b>	<b>69,403.62</b>

State of Illinois

County of Cook

The undersigned, James S. Wienold,, being first duly sworn on oath, deposes and says that (s)he is Chief Executive Officer of Bear Construction Company, General Contractor for the entire work for the following project:

Project: **Crete SD#201-U, Middle School - Auditorium Demo**

Location: **635 Olmstead Lane, University Park, IL 60484**

That for the purpose of this work, the foregoing orders have been placed and the foregoing parties subcontracted with by Bear Construction and have furnished materials or have provided labor, or both, for said project. That, the amount of such order or subcontract is as stated above and that there is due and to become due respectively, the amounts set opposite their names for materials, labor, or both. That this statement is made in compliance with the statutes of the State of Illinois relating to Mechanics Liens for the purpose of procuring from the Owner final payment in accordance with the terms of applicable contracts, and is a full, true, and complete statement, to the best of our knowledge, of all parties furnishing labor and/or material and of amounts paid, due, and to become due them.

Subscribed and sworn before me this **28th** day of **October, 2025**

Signed for Bear Construction Company:

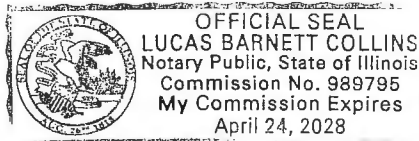
*[Signature]*

Notary Public

*[Signature]*  
James S. Wienold, Chief Executive Officer

Date:

**October 28, 2025**



State of Illinois }  
County of Cook } SS

# FINAL WAIVER OF LIEN

Waiver Not Valid Until Receipt of Payment

Gty # \_\_\_\_\_  
Escrow # \_\_\_\_\_

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by: Board of Education, Crete-Monee School District #201-U to furnish: General Work - Crete SD#201-U, Middle School - Auditorium Demo for the premises known as: 635 Olmstead Lane, University Park, IL of which: Crete-Monee School District 201U is the owner.

The undersigned, for and in consideration of: Sixty-Nine Thousand Four Hundred Three And 62 / 100 (\$69,403.62) Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged, does hereby waive and release any and all lien or claim, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvement thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises, INCLUDING EXTRAS.\*

DATE: 10/28/2025

COMPANY NAME: Bear Construction Company

ADDRESS: 1501 Rohiwing Road, Rolling Meadows, IL 60008

SIGNATURE AND TITLE:

James S. Wienold, Chief Executive Officer

\*EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT.

State of Illinois }  
County of Cook } SS

# CONTRACTOR'S AFFIDAVIT

TO WHOM IT MAY CONCERN:

The undersigned, James S. Wienold, being duly sworn, deposes and says that (s)he is Chief Executive Officer of Bear Construction Company who is the contractor furnishing General work on the building located at 635 Olmstead Lane, University Park, IL owned by Crete-Monee School District 201U.

That the total amount of the contract including extras is \$306,555.00 on which he has received payment of \$237,151.38 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

NAMES	WHAT FOR	CONTRACT AMOUNT	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
Bear Construction Company	General Work	306,555.00	237,151.38	69,403.62	0.00
Per Attached Sworn Statement					
TOTAL LABOR AND MATERIAL INCLUDING EXTRAS * TO COMPLETE:		306,555.00	237,151.38	69,403.62	0.00

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

DATE: 10/28/2025

SIGNATURE: \_\_\_\_\_

James S. Wienold, Chief Executive Officer

Subscribed and Sworn to me before me this 28th day of October, 2025



OFFICIAL SEAL  
LUCAS BARNETT COLLINS  
Notary Public, State of Illinois  
Commission No. 989795  
My Commission Expires  
April 27, 2028

Notary Public

\*EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT.

# TRAILING WAIVERS

DRAW 2



Gty # \_\_\_\_\_  
Escrow # \_\_\_\_\_

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by: Bear Construction Company

to furnish :	Plumbing	for the premises
known as:	Crete SD#201-U, Middle School - Auditorium Demo	
of which:	Crete-Monee School District 201-U	is the owner

The undersigned, for and in consideration of: Five Hundred Sixty Two Dollars and No Cents

\$ 562.00 Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged, does hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises. INCLUDING EXTRAS \*

DATE: 8/31/2025 COMPANY NAME: Warren F. Thomas Plumbing Company  
475 Quadrangle Drive, Suite A, Bolingbrook, IL 60440

SIGNATURE AND TITLE: George Thomas, President

\* EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT.

STATE OF ILLINOIS

## CONTRACTOR'S AFFIDAVIT

COUNTY OF WILL

TO WHOM IT MAY CONCERN:

THE UNDERSIGNED, George Thomas BEING DULY  
SWORN, DEPOSES AND SAYS THAT HE IS President OF Warren F. Thomas Plumbing Company  
WHO IS THE CONTRACTOR FURNISHING Plumbing WORK ON THE BUILDING  
LOCATED AT 635 Olmstead Lane, University Park, IL  
OWNED BY Crete-Monee School District 201-U

That the total amount of the contract including extras\* is \$562.00 on which he has received payment of: \$0.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

NAMES	WHAT FOR	CONTRACT PRICE	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
Warren F. Thomas Plumbing Company	Plumbing	\$562.00	\$0.00	\$562.00	\$0.00
Balance of material taken from fully paid stock and delivered to the jobsite in our company vehicle. All labor and benefits paid in full.					
There is no rental equipment on this project.					
TOTAL LABOR AND MATERIAL INCLUDING EXTRAS* TO COMPLETE		\$562.00	\$0.00	\$562.00	\$0.00

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

DATE: 8/31/2025

SIGNATURE: \_\_\_\_\_  
George Thomas, President

SUBSCRIBED AND SWORN TO BEFORE ME THIS 31st DAY OF August 2025

\* EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT





**FINAL WAIVER OF LIEN**Gty # \_\_\_\_\_  
Escrow # \_\_\_\_\_

COUNTY OF MCHENRY

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by: BEAR Construction Company  
 to furnish : Rough Carpentry Work for Crete SD#201-U, Middle School - Auditorium Demo for the premises  
 known as: 635 Olmstead Lane  
 of which: Crete-Monee School District 201U is the owner.

The undersigned, for and in consideration of: Fifteen Thousand Twenty Five Dollars and No Cents  
(\$15,025.00) Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged, does hereby  
 waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to  
 and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the  
 moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or  
 machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises, INCLUDING EXTRAS.\*

DATE: 8/31/2025COMPANY NAME: Lankford Construction1455 Karlens Way, Johnsburg, IL 60051

SIGNATURE AND TITLE:

Rob Copenhagen, President

\* EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT.

STATE OF ILLINOIS

**CONTRACTOR'S AFFIDAVIT**

COUNTY OF MCHENRY

TO WHOM IT MAY CONCERN:

THE UNDERSIGNED, Rob Copenhagen BEING DULY  
 SWORN, DEPOSES AND SAYS THAT HE IS President OF Lankford Construction  
 WHO IS THE CONTRACTOR FURNISHING Rough Carpentry WORK ON THE BUILDING  
 LOCATED AT 635 Olmstead Lane, University Park, IL  
 OWNED BY Crete-Monee School District 201U

That the total amount of the contract including extras\* is \$15,025.00 on which he has received  
 payment of: \$0.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally  
 and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have  
 furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material  
 entering into the construction thereof and amount due or to become due to each, and that the items mentioned include all labor and material  
 required to complete said work according to plans and specifications:

NAMES	WHAT FOR	CONTRACT PRICE	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
Lankford Construction	Rough Carpentry	\$15,025.00	\$0.00	\$15,025.00	\$0.00
Principal Supplier: LCC Painting					
P.O. Box 56, Fox Lake, IL 60020					
All material taken from fully paid stock and delivered to the jobsite in our company vehicle. All labor paid in full. There is no rental equipment on this project.					
TOTAL LABOR AND MATERIAL INCLUDING EXTRAS* TO COMPLETE		\$15,025.00	\$0.00	\$15,025.00	\$0.00

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor  
 or other work of any kind done or to be done upon or in connection with said work other than above stated.

DATE: 9/11/2025SIGNATURE: Rob Copenhagen, President

SUBSCRIBED AND SWORN TO BEFORE ME THIS

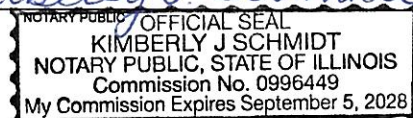
11th

DAY OF

September

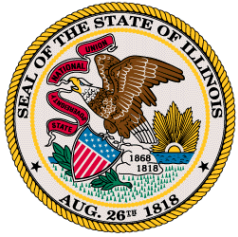
, 2025.

\* EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT.



# TRAILING CERTIFIED PAYROLL

Draw 2



Case #: 25-CTP-252467

Illinois Department of Labor

160 N. LaSalle St Suite1300  
Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

## CERTIFIED TRANSCRIPT OF PAYROLL FORM

### PAY PERIOD

<b>Payroll Date</b>	<b>Project Location</b>
7/26/2025 to 8/1/2025	635 OLMSTEAD LN
<b>FEIN or Contractor Number</b>	UNIVERSITY PARK IL 60484
36-3351654	
<b>Project Number or Name</b>	<b>State Capital Funds</b>
210300-23 Crete SD#201U Middle School Auditorium Demo	No
<b>Agency</b>	
Education, Board of	

### Contractor and/or Subcontractor

<b>Company Name</b>	<b>Contractor Location</b>
BEAR Construction Company	1501 ROHLWING RD
<b>Contact Name</b>	ROLLING MEADOWS IL 60008
Susan Rhodes	
<b>Primary Email</b>	<b>Secondary Email</b>
compliance@bearcc.com	srhodes@bearcc.com
<b>Primary Phone</b>	<b>Secondary Phone</b>
8472221900	

### Public Body Information

<b>Public Body Name</b>	<b>Public Body Address</b>
210300-23 Crete SD#201U Middle School Auditorium Demo	635 OLMSTEAD LN
<b>Contact Name</b>	UNIVERSITY PARK IL 60484
<b>Primary Phone</b>	<b>Secondary Phone</b>

Employee Details

Name	Last4SSN	Classification	Address	City	Race	Ethnicity	G	V	J	F	A	PhoneNumber
Kenneth Barr	8601	LABORER JOURNEYMAN---	5857 107TH PL	CHICAGO RIDGE IL 60415	White	N H L	M	No	No	No	No	7086634227
CHARLES EAHEART	5603	CONSTRUCTION SITE MANAGER--	317 HARVARD CT	SHOREWOOD IL 60404	White	N H L	M	No	No	No	No	8155465939
WILMER MALDONADO	4780	CARPENTER JOURNEYMAN---	929 N SACRAMENTO BLVD	CHICAGO IL 60622	Hispanic or Latino	H L	M	No	No	No	No	3124146368
Bryton Reynolds	8461	CARPENTER APPRENTICE---	25587 W ARCADE DR S	LAKE VILLA IL 60046	White	N H L	M	No	No	No	No	2246277401

G-GenderV-VeteranJ-JourneymanF-ForemanA-Apprentice

N H L- Not Hispanic or Latino  
H L- Hispanic or Latino

Work Classification

Name		Mon	Tue	Wed	Thr	Fri	Sat	Sun	Straight Hrs	Tot OT Hrs	Dub Tim Hrs	Hourly Wage	OT Wage Rate	DbI Tim Wage	Gross	Net	No Work
Kenneth Barr	P	3.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00	0.00		51.40	0.00		2672.80	1950.46	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00		0.00	0.00	
Pension		0.00		Health		0.00		Vacation		0.00		Training		0.00			
Hourly Other Ins				0.00		15AddOT		0.00		20AddOT		0.00					
CHARLES EAHEART	P	2.00	2.00	2.00	2.00	2.00	0.00	0.00	10.00	0.00		57.69	0.00		2307.60	1531.63	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00		0.00	0.00	
Pension		0.00		Health		0.00		Vacation		0.00		Training		0.00			
Hourly Other Ins				0.00		15AddOT		0.00		20AddOT		0.00					
WILMER MALDONADO	P	0.00	8.00	8.00	0.00	0.00	0.00	0.00	16.00	0.00		56.71	0.00		2098.20	1382.99	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00		0.00	0.00	
Pension		0.00		Health		0.00		Vacation		0.00		Training		0.00			
Hourly Other Ins				0.00		15AddOT		0.00		20AddOT		0.00					

Bryton Reynolds	P	3.00	0.00	0.00	0.00	0.00	3.00	0.00	3.00	3.00		28.36	42.54		1624.99	1038.84	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00		0.00	0.00	
Pension		0.00		Health		0.00		Vacation		0.00		Training		0.00			
Hourly Other Ins		0.00		15AddOT		0.00		20AddOT		0.00							

I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project that during the payroll period commencing between mentioned above , 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 from the fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

SUSAN RHODES

Aug 11, 2025



Case #: 25-CTP-259508

Illinois Department of Labor

160 N. LaSalle St Suite1300  
Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

CERTIFIED TRANSCRIPT OF PAYROLL FORM

PAY PERIOD

<b>Payroll Date</b>	<b>Project Location</b>
8/2/2025 to 8/8/2025	635 OLMSTEAD LN
<b>FEIN or Contractor Number</b>	UNIVERSITY PARK IL 60484
36-3351654	
<b>Project Number or Name</b>	<b>State Capital Funds</b>
210300-23 Crete SD#201U Middle School Auditorium Demo	No
<b>Agency</b>	
Education, Board of	

Contractor and/or Subcontractor

<b>Company Name</b>	<b>Contractor Location</b>
BEAR Construction Company	1501 ROHLWING RD
<b>Contact Name</b>	ROLLING MEADOWS IL 60008
Susan Rhodes	
<b>Primary Email</b>	<b>Secondary Email</b>
compliance@bearcc.com	srhodes@bearcc.com
<b>Primary Phone</b>	<b>Secondary Phone</b>
8472221900	

Public Body Information

<b>Public Body Name</b>	<b>Public Body Address</b>
210300-23 Crete SD#201U Middle School Auditorium Demo	635 OLMSTEAD LN
<b>Contact Name</b>	UNIVERSITY PARK IL 60484
<b>Primary Phone</b>	<b>Secondary Phone</b>

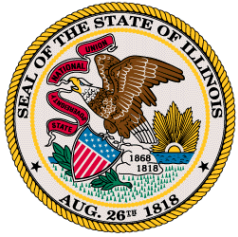




I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project that during the payroll period commencing between mentioned above , all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said from the fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

SUSAN RHODES

Aug 14, 2025



Case #: 25-CTP-269091

Illinois Department of Labor

160 N. LaSalle St Suite1300  
Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

## CERTIFIED TRANSCRIPT OF PAYROLL FORM

### PAY PERIOD

<b>Payroll Date</b>	<b>Project Location</b>
7/14/2025 to 7/20/2025	635 OLMSTEAD LN
<b>FEIN or Contractor Number</b>	UNIVERSITY PARK IL 60484
32-0028068	
<b>Project Number or Name</b>	<b>State Capital Funds</b>
Crete SD#201-U, Middle School-Auditorium Demo	No
<b>Agency</b>	
Education, Board of	

### Contractor and/or Subcontractor

<b>Company Name</b>	<b>Contractor Location</b>
Alliance Concrete Sawing & Drilling	570 ROCK ROAD DR STE N
<b>Contact Name</b>	EAST DUNDEE IL 60118
Sandi Elston	
<b>Primary Email</b>	<b>Secondary Email</b>
sandi@alliancesawing.com	SarahM@bearcc.com
<b>Primary Phone</b>	<b>Secondary Phone</b>
8477836585	

### Public Body Information

<b>Public Body Name</b>	<b>Public Body Address</b>
Crete-Monee School District 201U	690 W EXCHANGE ST
<b>Contact Name</b>	CRETE IL 60417
<b>Primary Phone</b>	<b>Secondary Phone</b>

Employee Details

Name	Last4SSN	Classification	Address	City	Race	Ethnicity	G	V	J	F	A	PhoneNumber
Darren ASlowiak	3462	laborer---	150 WILLEY ST	GILBERTS IL 60136	White	N H L	M	No	No	Yes	No	8479713846
Erasm Villanueva	0671	laborer---	2604 N MANGO AVE	CHICAGO IL 60639	Hispanic or Latino	H L	M	No	Yes	No	No	7732439603
Fernando Navarro	3326	laborer---	9218 MAGNOLIA AVE	MOKENA IL 60448	Hispanic or Latino	H L	M	No	Yes	No	No	7089108004
Rudy Torres	8650	laborer---	6437 S KOLIN AVE	CHICAGO IL 60629	Hispanic or Latino	H L	M	No	Yes	No	No	3125906563
Nathan E.Martinez	1297	Operator---	9625 N HUNTERS LN	SPRING GROVE IL 60081	Hispanic or Latino	H L	M	No	No	No	Yes	2622062581

G-GenderV-VeteranJ-JourneymanF-ForemanA-Apprentice

N H L- Not Hispanic or Latino

H L- Hispanic or Latino

Work Classification

Name		Mon	Tue	Wed	Thr	Fri	Sat	Sun	Straight Hrs	Tot OT Hrs	Dub Tim Hrs	Hourly Wage	OT Wage Rate	Dbl Tim Wage	Gross	Net	No Work
Darren ASlowiak	P	0.00	8.00	0.00	10.00	8.00	0.00	0.00	24.00	2.00		52.90	79.35	105.80	1428.30	919.37	
	NP	8.00	0.00	8.00	0.00	0.00	0.00	0.00	16.00	0.00		52.90	79.35	105.80	846.40	544.59	
Pension		17.71			Health		18.32		Vacation	0.00		Training	0.91				
Hourly Other Ins				0.00	15AddOT		0.00		20AddOT	0.00							
Erasm Villanueva	P	0.00	8.00	0.00	9.00	8.00	0.00	0.00	24.00	1.00		51.40	77.10	102.80	1310.70	991.07	
	NP	8.00	0.00	1.00	0.00	0.00	7.00	0.00	9.00	7.00		51.40	77.10	102.80	1002.30	757.87	
Pension		17.71			Health		18.32		Vacation	0.00		Training	0.91				
Hourly Other Ins				0.00	15AddOT		0.00		20AddOT	0.00							
Fernando Navarro	P	0.00	8.00	0.00	10.00	8.00	0.00	0.00	24.00	2.00		51.40	77.10	102.80	1387.80	1033.60	
	NP	2.00	0.00	0.00	0.00	0.00	3.00	0.00	2.00	3.00		51.40	77.10	102.80	334.10	248.78	
Pension		17.71			Health		18.32		Vacation	0.00		Training	0.91				
Hourly Other Ins				0.00	15AddOT		0.00		20AddOT	0.00							

Rudy Torres	P	0.00	8.00	0.00	10.00	8.00	0.00	0.00	24.00	2.00		51.40	77.10	102.80	1387.80	956.23	
	NP	2.00	0.00	0.00	0.00	0.00	3.00	0.00	2.00	3.00		51.40	77.10	102.80	334.10	230.21	
Pension		17.71		Health		18.32		Vacation		0.00		Training		0.91			
Hourly Other Ins		0.00		15AddOT		0.00		20AddOT		0.00							

Nathan E.Martinez	P	0.00	8.50	0.00	9.50	9.00	0.00	0.00	24.00	0.00	3.00	32.75	49.13	65.50	982.50	730.49	
	NP	8.50	0.00	0.00	0.00	0.00	0.00	0.00	8.00	0.00	0.50	32.75	49.13	65.50	294.75	218.20	
Pension		20.00		Health		19.05		Vacation		2.00		Training		1.83			
Hourly Other Ins		0.00		15AddOT		0.00		20AddOT		0.00							

I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project that during the payroll period commencing between mentioned above , 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 from the fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

Wayne Slowiak  
Aug 20, 2025



Case #: 25-CTP-269188

Illinois Department of Labor

160 N. LaSalle St Suite1300  
Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

## CERTIFIED TRANSCRIPT OF PAYROLL FORM

### PAY PERIOD

<b>Payroll Date</b>	<b>Project Location</b>
7/21/2025 to 7/27/2025	635 OLMSTEAD LN
<b>FEIN or Contractor Number</b>	UNIVERSITY PARK IL 60484
32-0028068	
<b>Project Number or Name</b>	<b>State Capital Funds</b>
Crete SD#201-U, Middle School-Auditorium Demo	No
<b>Agency</b>	
Education, Board of	

### Contractor and/or Subcontractor

<b>Company Name</b>	<b>Contractor Location</b>
Alliance Concrete Sawing & Drilling	570 ROCK ROAD DR STE N
<b>Contact Name</b>	EAST DUNDEE IL 60118
Sandi Elston	
<b>Primary Email</b>	<b>Secondary Email</b>
sandi@alliancesawing.com	SarahM@bearcc.com
<b>Primary Phone</b>	<b>Secondary Phone</b>
8477836585	

### Public Body Information

<b>Public Body Name</b>	<b>Public Body Address</b>
Crete-Monee School District 201U	690 W EXCHANGE ST
<b>Contact Name</b>	CRETE IL 60417
<b>Primary Phone</b>	<b>Secondary Phone</b>



Employee Details

Name	Last4SSN	Classification	Address	City	Race	Ethnicity	G	V	J	F	A	PhoneNumber
Darren ASlowiak	3462	laborer---	150 WILLEY ST	GILBERTS IL 60136	White	N H L	M	No	No	Yes	No	8479713846
George JGirten	9395	laborer---	27630 W ROWE AVE	SPRING GROVE IL 60081	White	N H L	M	No	No	Yes	No	8474174288
Erasmo Villanueva	0671	laborer---	2604 N MANGO AVE	CHICAGO IL 60639	Hispanic or Latino	H L	M	No	Yes	No	No	7732439603
Rudy Torres	8650	laborer---	6437 S KOLIN AVE	CHICAGO IL 60629	Hispanic or Latino	H L	M	No	Yes	No	No	3125906563
Fernando Navarro	3326	laborer---	9218 MAGNOLIA AVE	MOKENA IL 60448	Hispanic or Latino	H L	M	No	Yes	No	No	7089108004
Nathan E.Martinez	1297	Operator ---	9625 N HUNTERS LN	SPRING GROVE IL 60081	Hispanic or Latino	H L	M	No	No	No	Yes	2622062581

G-GenderV-VeteranJ-JourneymanF-ForemanA-Apprentice

N H L- Not Hispanic or Latino  
H L- Hispanic or Latino

Work Classification

Name		Mon	Tue	Wed	Thr	Fri	Sat	Sun	Straight Hrs	Tot OT Hrs	Dub Tim Hrs	Hourly Wage	OT Wage Rate	Dbl Tim Wage	Gross	Net	No Wor k
Darren ASlowiak	P	8.00	4.00	8.00	8.00	4.00	0.00	0.00	32.00	0.00		52.90	79.35	105.80	1692.80	1108.80	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00		0.00	0.00	
Pension		17.71	Health		18.32		Vacation		0.00		Training		0.91				
Hourly Other Ins		0.00		15AddOT		0.00		20AddOT		0.00							
George JGirten	P	0.00	8.00	8.00	6.00	0.00	0.00	0.00	22.00	0.00		52.90	79.35	105.80	1163.80	947.86	
	NP	8.00	0.00	0.00	0.00	0.00	0.00	0.00	8.00	0.00		52.90	79.35	105.90	423.20	344.56	
Pension		17.71	Health		18.32		Vacation		0.00		Training		0.91				
Hourly Other Ins		0.00		15AddOT		0.00		20AddOT		0.00							
Erasmo Villanueva	P	8.00	8.00	8.00	8.00	0.00	0.00	0.00	32.00	0.00		51.40	77.10	102.80	1644.80	1270.17	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00		0.00	0.00	
Pension		17.71	Health		18.32		Vacation		0.00		Training		0.91				
Hourly Other Ins		0.00		15AddOT		0.00		20AddOT		0.00							

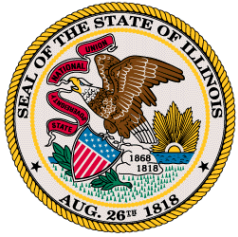
Rudy Torres	P	8.00	8.00	8.00	8.00	0.00	0.00	0.00	32.00	0.00		51.40	77.10	102.80	1644.80	1138.89	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00		0.00	0.00	
Pension		17.71		Health		18.32		Vacation		0.00		Training		0.91			
Hourly Other Ins		0.00		15AddOT		0.00		20AddOT		0.00							

Fernando Navarro	P	8.00	8.00	8.00	8.00	0.00	0.00	0.00	32.00	0.00		51.40	77.10	102.80	1644.80	1227.12	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00		0.00	0.00	
Pension		17.71		Health		18.32		Vacation		0.00		Training		0.91			
Hourly Other Ins		0.00		15AddOT		0.00		20AddOT		0.00							

Nathan E.Martinez	P	8.50	8.50	8.00	8.00	0.00	0.00	0.00	32.00	0.00	2.00	32.75	49.13	65.50	113.50	845.36	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00		0.00	0.00	
Pension		20.00		Health		19.05		Vacation		2.00		Training		1.83			
Hourly Other Ins		0.00		15AddOT		0.00		20AddOT		0.00							

I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project that during the payroll period commencing between mentioned above , 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 from the fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

Wayne Slowiak  
 Aug 20, 2025



Case #: 25-CTP-269249

Illinois Department of Labor

160 N. LaSalle St Suite1300  
Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

## CERTIFIED TRANSCRIPT OF PAYROLL FORM

### PAY PERIOD

<b>Payroll Date</b>	<b>Project Location</b>
7/28/2025 to 8/3/2025	635 OLMSTEAD LN
<b>FEIN or Contractor Number</b>	UNIVERSITY PARK IL 60484
32-0028068	
<b>Project Number or Name</b>	<b>State Capital Funds</b>
Crete SD#201-U, Middle School-Auditorium Demo	No
<b>Agency</b>	
Education, Board of	

### Contractor and/or Subcontractor

<b>Company Name</b>	<b>Contractor Location</b>
Alliance Concrete Sawing & Drilling	570 ROCK ROAD DR STE N
<b>Contact Name</b>	EAST DUNDEE IL 60118
Sandi Elston	
<b>Primary Email</b>	<b>Secondary Email</b>
sandi@alliancesawing.com	SarahM@bearcc.com
<b>Primary Phone</b>	<b>Secondary Phone</b>
8477836585	

### Public Body Information

<b>Public Body Name</b>	<b>Public Body Address</b>
Crete-Monee School District 201U	690 W EXCHANGE ST
<b>Contact Name</b>	CRETE IL 60417
<b>Primary Phone</b>	<b>Secondary Phone</b>



Rudy Torres	P	0.00	8.00	0.00	0.00	0.00	0.00	0.00	8.00	0.00		51.40	77.10	102.80	411.20	313.99	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00		0.00	0.00	
Pension		17.71		Health		18.32		Vacation		0.00		Training		0.91			
Hourly Other Ins		0.00		15AddOT		0.00		20AddOT		0.00							

Fernando Navarro	P	0.00	8.00	0.00	0.00	0.00	0.00	0.00	8.00	0.00		51.40	77.10	102.80	411.20	335.74	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00		0.00	0.00	
Pension		17.71	Health		18.32	Vacation		0.00	Training		0.91						
Hourly Other Ins		0.00	15AddOT		0.00	20AddOT		0.00									

I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project that during the payroll period commencing between mentioned above , 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 from the fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

Wayne Slowiak  
Aug 20, 2025



Case #: 25-CTP-269271

Illinois Department of Labor

160 N. LaSalle St Suite1300  
Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

## CERTIFIED TRANSCRIPT OF PAYROLL FORM

### PAY PERIOD

<b>Payroll Date</b>	<b>Project Location</b>
8/4/2025 to 8/10/2025	635 OLMSTEAD LN
<b>FEIN or Contractor Number</b>	UNIVERSITY PARK IL 60484
32-0028068	<b>No Work Report: Yes</b>
<b>Project Number or Name</b>	<b>State Capital Funds</b>
Crete SD#201-U, Middle School-Auditorium Demo	No
<b>Agency</b>	
Education, Board of	

### Contractor and/or Subcontractor

<b>Company Name</b>	<b>Contractor Location</b>
Alliance Concrete Sawing & Drilling	570 ROCK ROAD DR STE N
<b>Contact Name</b>	EAST DUNDEE IL 60118
Sandi Elston	
<b>Primary Email</b>	<b>Secondary Email</b>
sandi@alliancesawing.com	SarahM@bearcc.com
<b>Primary Phone</b>	<b>Secondary Phone</b>
8477836585	

### Public Body Information

<b>Public Body Name</b>	<b>Public Body Address</b>
Crete-Monee School District 201U	690 W EXCHANGE ST
<b>Contact Name</b>	CRETE IL 60417
<b>Primary Phone</b>	<b>Secondary Phone</b>



Employee Details												
Name	Last4SSN	Classification	Address	City	Race	Ethnicity	G	V	J	F	A	PhoneNumber

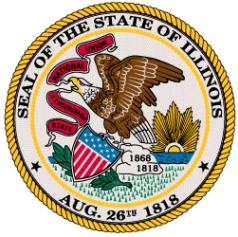
G-GenderV-VeteranJ-JourneymanF-ForemanA-Apprentice

N H L- Not Hispanic or Latino  
H L- Hispanic or Latino

Work Classification																	
Name		Mon	Tue	Wed	Thr	Fri	Sat	Sun	Straight Hrs	Tot OT Hrs	Dub Tim Hrs	Hourly Wage	OT Wage Rate	Dbl Tim Wage	Gross	Net	No Wor k

I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project that during the payroll period commencing between mentioned above , 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 from the fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

Wayne Slowiak  
Aug 20, 2025



Case #: 25-CTP-269281

Illinois Department of Labor

160 N. LaSalle St Suite1300  
Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

## CERTIFIED TRANSCRIPT OF PAYROLL FORM

### PAY PERIOD

<b>Payroll Date</b>	<b>Project Location</b>
8/11/2025 to 8/17/2025	635 OLMSTEAD LN
<b>FEIN or Contractor Number</b>	UNIVERSITY PARK IL 60484
32-0028068	<b>No Work Report: Yes</b>
<b>Project Number or Name</b>	<b>State Capital Funds</b>
Crete SD#201-U, Middle School-Auditorium Demo	No
<b>Agency</b>	
Education, Board of	

### Contractor and/or Subcontractor

<b>Company Name</b>	<b>Contractor Location</b>
Alliance Concrete Sawing & Drilling	570 ROCK ROAD DR STE N
<b>Contact Name</b>	EAST DUNDEE IL 60118
Sandi Elston	
<b>Primary Email</b>	<b>Secondary Email</b>
sandi@alliancesawing.com	SarahM@bearcc.com
<b>Primary Phone</b>	<b>Secondary Phone</b>
8477836585	

### Public Body Information

<b>Public Body Name</b>	<b>Public Body Address</b>
Crete-Monee School District 201U	690 W EXCHANGE ST
<b>Contact Name</b>	CRETE IL 60417
<b>Primary Phone</b>	<b>Secondary Phone</b>

Employee Details												
Name	Last4SSN	Classification	Address	City	Race	Ethnicity	G	V	J	F	A	PhoneNumber

G-GenderV-VeteranJ-JourneymanF-ForemanA-Apprentice

N H L- Not Hispanic or Latino  
H L- Hispanic or Latino

Work Classification																	
Name		Mon	Tue	Wed	Thr	Fri	Sat	Sun	Straight Hrs	Tot OT Hrs	Dub Tim Hrs	Hourly Wage	OT Wage Rate	Dbl Tim Wage	Gross	Net	No Wor k

I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project that during the payroll period commencing between mentioned above , 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 from the fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

Wayne Slowiak  
Aug 20, 2025