



October 31, 2025

Draw No.: 3
Invoice No.: 210300-22C
Bear Job No.: 210300-22

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

RE: Crete-Monee SD#201U, Middle
School - Breakout Rooms at 635
Olmstead Lane, University Park, IL

INVOICE

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

Original Contract Amount	\$232,800.00
Change Orders Approved to Date	<u>\$-45,637.01</u>
Current Contract Amount	\$187,162.99
Work Completed to Date	\$187,162.99
Less: Retainage	(\$0.00)
Less: Previously Invoiced	<u>(\$125,709.66)</u>

TOTAL AMOUNT DUE THIS INVOICE	\$61,453.33
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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-Monee SD#201U, Middle School
- Breakout Rooms

Job No.: 210300-22

Address: 635 Olmstead Lane, University Park,
IL

Invoice No.: 210300-22C

Period To: 10/31/2025

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

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	\$232,800.00
2. Net Change By Change Order	-\$45,637.01
3. Contract Sum To Date	\$187,162.99
4. Total Completed and Stored To Date	\$187,162.99
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	\$187,162.99
7. Less Previous Certificates For Payments	\$125,709.66
8. Current Payment Due	\$61,453.33
9. Balance To Finish, Plus Retainage	\$0.00

CHANGE ORDER SUMMARY	Additions	Deductions
Total changes approved in previous months by Owner	\$0.00	\$0.00
Total Approved this Month	\$0.00	\$45,637.01
TOTALS	\$0.00	\$45,637.01
NET CHANGES by Change Order	-\$45,637.01	

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: 11/6/2025
James S. Wienold, Chief Executive Officer

State of: **Illinois**

County of: **Cook**

Subscribed and sworn to before me this
6th day of November, 2025

Notary Public: He
My Commission expires: 4/11/18

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 **\$61,453.33**

(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: 10/31/25

Period To: 10/31/25

Invoice #: 210300-22C

Contract: 210300-22 Crete-Monee SD#201U, Middle School - Breakout Rooms

Architect's Project No.:

A	B		C	D	E	F	G		H	I
Item No.	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	9,999.34	5,701.62	4,297.72	0.00	9,999.34	100.00%	0.00	0.00
2	Bear Construction Company	General Conditions	34,319.00	19,568.69	14,750.31	0.00	34,319.00	100.00%	0.00	0.00
3	Bear Construction Company	Payment & Performance Bond	3,352.00	3,352.00	0.00	0.00	3,352.00	100.00%	0.00	0.00
4	Bear Construction Company	Insurance	2,327.70	2,327.70	0.00	0.00	2,327.70	100.00%	0.00	0.00
5	Bear Construction Company	OH&P	25,635.30	14,617.25	11,018.05	0.00	25,635.30	100.00%	0.00	0.00
6	Bear Construction Company	Owners Allowance	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
7	JLDC Construction, Inc.	Rough Carpentry	13,699.00	12,329.00	1,370.00	0.00	13,699.00	100.00%	0.00	0.00
8	Chicago Doorways, LLC	Doors/Frames/Hardware	38,000.00	24,821.64	13,178.36	0.00	38,000.00	100.00%	0.00	0.00
9	Arlington Glass & Mirror Co.	Glass and Glazing	4,610.00	0.00	4,610.00	0.00	4,610.00	100.00%	0.00	0.00
10	N.A. Favia Builder, Inc. dba Alpine Acoustics	Ceilings	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
11	Douglas Floor Covering, Inc.	Flooring	5,190.00	0.00	5,190.00	0.00	5,190.00	100.00%	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	Electrical Systems, Inc.	Electrical	32,344.95	32,344.95	0.00	0.00	32,344.95	100.00%	0.00	0.00
14	Lankford Construction Co.	Painting and Drywall	17,685.70	17,685.70	0.00	0.00	17,685.70	100.00%	0.00	0.00

Sworn Statement for Contractor and Subcontractor To Owner

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

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

Application Date: **10/31/2025**
Application No.: **3**
Project No.: **210300-22**
Invoice No.: **210300-22C**

Project: **Crete-Monee SD#201U, Middle School - Breakout Rooms**

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
Bear Construction Company						
Mobilization	9,999.34	9,999.34	0.00	5,131.46	4,867.88	0.00
General Conditions	34,319.00	34,319.00	0.00	17,611.82	16,707.18	0.00
Payment & Performance Bond	3,352.00	3,352.00	0.00	3,016.80	335.20	0.00
Insurance	2,327.70	2,327.70	0.00	2,094.93	232.77	0.00
OH&P	25,635.30	25,635.30	0.00	13,155.52	12,479.78	0.00
Owners Allowance	0.00	0.00	0.00	0.00	0.00	0.00
Rough Carpentry						
JLDC Construction, Inc. 4616 W. 138th Street Crestwood, IL 60418 (708) 926-2030 accounting@jldcconstruction.com	13,699.00	13,699.00	0.00	12,329.00	1,370.00	0.00
Doors/Frames/Hardware						
Chicago Doorways, LLC 219 W. Diversey Avenue Elmhurst, IL 60126 (630) 279-2227 brace@chicagodoorways.com	38,000.00	38,000.00	0.00	22,339.48	15,660.52	0.00
Glass and Glazing						
Arlington Glass & Mirror Co. 4547 N. Milwaukee Avenue Chicago, IL 60630 (773) 283-0737 sjacinto@arlingtonglass.com	4,610.00	4,610.00	0.00	0.00	4,610.00	0.00
Flooring						
Douglas Floor Covering, Inc. 200 Alder Drive North Aurora, IL 60542 (630) 892-8620 kathy@douglasflooring.com	5,190.00	5,190.00	0.00	0.00	5,190.00	0.00
Electrical						
Electrical Systems, Inc. 17335 S. Ashland Avenue East Hazel Crest, IL 60429 (708) 647-1300 dshinkle@esipower.com	32,344.95	32,344.95	0.00	32,344.95	0.00	0.00

Sworn Statement for Contractor and Subcontractor To Owner

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

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

Application Date: **10/31/2025**
Application No.: **3**
Project No.: **210300-22**
Invoice No.: **210300-22C**

Project: **Crete-Monee SD#201U, Middle School - Breakout Rooms**

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
Painting and Drywall						
Lankford Construction Co. 1455 Karlens Way Johnsburg, IL 60051 (847) 497-0800 kschmidt@lcco.com; dpollard@lcco.com	17,685.70	17,685.70	0.00	17,685.70	0.00	0.00
Totals	187,162.99	187,162.99	0.00	125,709.66	61,453.33	0.00

Amount of Original Contract 232,800.00
Extras to Contract 0.00

Total Contract and Extras 232,800.00
Credits to Contract -45,637.01

Adjusted Total Contract 187,162.99

Completed & Stored to Date 187,162.99
Total Retained by Owner 0.00

Net Amount Earned 187,162.99
Previously Requested 125,709.66

Net Amount Due This Payment 61,453.33

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:

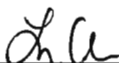
Project: **Crete-Monee SD#201U, Middle School - Breakout Rooms**

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

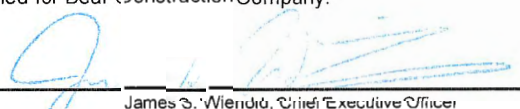
That for the purpose of this work, the foregoing orders have been placed and the foregoing parties subcontracted with by Bear Construction and have furnished materials or have provided labor, or both, for said project. That, the amount of such order or subcontract is as stated above and that there is 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 **6th** day of **November, 2025**

Signed for Bear Construction Company:



Notary Public


James S. Wienold, Chief Executive Officer

Date:

November 6, 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-Monee SD#201U, Middle School - Breakout Rooms 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-One Thousand Four Hundred Fifty-Three And 33 / 100 (\$61,453.33) 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: 10/31/2025

COMPANY NAME: Bear Construction Company

ADDRESS: 1501 Rohlwing 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 \$187,162.99 on which he has received payment of \$125,709.66 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	187,162.99	125,709.66	61,453.33	0.00
Per Attached Sworn Statement					
TOTAL LABOR AND MATERIAL INCLUDING EXTRAS * TO COMPLETE:		187,162.99	125,709.66	61,453.33	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: 11/6/2025

SIGNATURE: _____

James S. Wienold, Chief Executive Officer

Subscribed and Sworn to me before me this 6th day of November, 2025

Notary Public

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

TRAILING WAIVERS

DRAW 2

STATE OF ILLINOIS

FINAL WAIVER OF LIEN

COUNTY OF COOK

Gly # _____
Escrow # _____

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by: Bear Construction Company
to furnish: Rough Carpentry Work for Crete Monnee SD#201U, Middle School
known as: Crete Monnee SD#201U, Middle School for the premises
of which: Crete-Monnee School District 201U is the owner.

The undersigned, for and in consideration of: Twelve Thousand Three Hundred Twenty Nine Dollars and No Cents (\$12,329.00) 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: JLDC Construction, Inc.4616 138th Street Crestwood, IL 60418

SIGNATURE AND TITLE:

Juan CuirelJuan Cuirel, Office Manager

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

STATE OF ILLINOIS

CONTRACTOR'S AFFIDAVIT

COUNTY OF COOK

TO WHOM IT MAY CONCERN:

THE UNDERSIGNED, Juan Cuirel BEING DULY
SWORN, DEPOSES AND SAYS THAT HE IS Office Manager OF JLDC Construction, Inc.
WHO IS THE CONTRACTOR FURNISHING Rough Carpentry WORK ON THE BUILDING
LOCATED AT 635 Olmstead Lane, University Park, IL
OWNED BY Crete-Monnee School District 201U

That the total amount of the contract including extras* is \$12,329.00 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
JLDC Construction, Inc.	Rough Carpentry	\$12,329.00	\$0.00	\$12,329.00	\$0.00
Principal Supplier: L & W Supply					
1099 Greenleaf Avenue					
847-303-9800					
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		\$12,329.00	\$0.00	\$12,329.00	\$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: 9/15/2025

SIGNATURE:

Juan CuirelJuan Cuirel, Office Manager

SUBSCRIBER AND SWORN TO BEFORE ME THIS

15th

DAY OF

September

, 2025.

Official Seal
ROBIN WACHOWSKI
Notary Public, State of Illinois
Commission No. 604986
My Commission Expires June 28, 2028

Rob Wachowski
NOTARY PUBLIC

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

WAIVER OF LIEN TO DATE

STATE OF: IL

Gty # _____

COUNTY OF: DUPAGE

Loan # _____

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Bear Construction Company
to furnish Doors, Frames & Hardware
for the premises known as Crete-Monee SD#201U, Middle School - Breakout Rooms, 635 Olmstead Lane
of which Crete-Monee School District 201U is the owner.

THE undersigned, for and in consideration of Twelve Thousand Four Hundred Twenty and 11/100
(\$12,420.11) Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged, do(es))
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 labor services, material, fixtures, apparatus or machinery,
furnished to this date by the undersigned for the above-described premises, INCLUDING EXTRAS*.

DATE: September 9, 2025

COMPANY NAME: Chicago Doorways LLC

ADDRESS: 219 W. Diversey Ave. Elmhurst, IL 60126

SIGNATURE AND TITLE: _____

TYPE OUT NAME & TITLE: Richard Ochandategui, General Manager

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

CONTRACTOR'S AFFIDAVIT

STATE OF: IL

COUNTY OF: DUPAGE

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he is Richard Ochandategui
General Manager of the Chicago Doorways LLC.
who is the contractor/supplier for the Doors, Frames & Hardware work on the
building located at Crete-Monee SD#201U, Middle School - Breakout Rooms, 635 Olmstead Lane
owned by Crete-Monee School District 201U
That the total amount of the contract including extras * \$42,500.00 on which he has received payment of
\$9,919.37 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 the 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
Chicago Doorways LLC	Doors, Frames & Hardware	\$42,500.00	\$9,919.37	\$12,420.11	\$20,160.52
All bills for material have been fully paid and discharged without exception					
Material used was taken from our own stock and delivered by our own truck					
All labor is paid. No outside rental equipment used.					
TOTAL LABOR AND MATERIAL INCLUDING EXTRAS * TO COMPLETE		\$42,500.00	\$9,919.37	\$12,420.11	\$20,160.52

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.

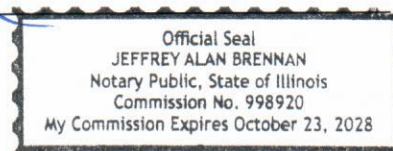
Signed this 9th day of September, 2025

Signature: _____

Subscribed and sworn to before me this 9th day of September, 2025

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

Signature: _____
Notary Public



Gty # _____
Escrow # _____

WHEREAS the undersigned has been employed by: BEAR Construction Company
Electrical Work for Crete Monee SD#201U, Middle School-Breakout Rooms for the premises
635 Olmstead Lane
Crete-Monee School District 201-U is the owner.

DATE: 8/19/2025 COMPANY NAME: Electrical Systems, Inc.
17335 S. Ashland Ave. East Hazel Crest, IL 60429

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


COUNTY OF COOK

THE UNDERSIGNED, Robert J. Bergeron, Jr. BEING DULY
SWORN, DEPOSES AND SAYS THAT HE IS Vice President OF Electrical Systems, Inc.
WHO IS THE CONTRACTOR FURNISHING Electrical WORK ON THE BUILDING
LOCATED AT 635 Olmstead Lane, University Park, IL
OWNED BY Crete-Monee School District 201-U

NAMES	WHAT FOR	CONTRACT PRICE	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
Electrical Systems, Inc.	Electrical	\$32,344.95	\$0.00	\$31,344.95	\$0.00
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		\$32,344.95	\$0.00	\$32,344.95	\$0.00

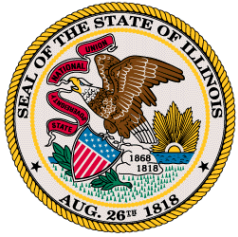
DATE: 9/8/2025 SIGNATURE: 
Robert J. Bergeron, Jr., Vice President

OFFICIAL SEAL
KIMBERLY ANN MANCUSO
Notary Public, State of Illinois
Commission No. 1011063
My Commission Expires May 28, 2025


NOTARY PUBLIC

TRAILING CERTIFIED PAYROLL

Draw 2



Case #: 25-CTP-294565

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

Payroll Date	Project Location
7/14/2025 to 7/20/2025	635 OLMSTEAD LN
FEIN or Contractor Number	UNIVERSITY PARK IL 60484
362964568	
Project Number or Name	State Capital Funds
210300-22004	No
Agency	
Education, Board of	

Contractor and/or Subcontractor

Company Name	Contractor Location
ELECTRICAL SYSTEMS, INC.	17335 ASHLAND AVE
Contact Name	EAST HAZEL CREST IL 60429
DANA SHINKLE	
Primary Email	Secondary Email
DSHINKLE@ESIPOWER.COM	DSHINKLE@ESIPOWER.COM
Primary Phone	Secondary Phone
7086471300	

Public Body Information

Public Body Name	Public Body Address
CRETE-MONEE SCHOOL DISTRICT 201-U, MIDDLE SCHOOL	690 W EXCHANGE ST
Contact Name	CRETE IL 60417
Primary Phone	Secondary Phone

Employee Details

Name	Last4SSN	Classification	Address	City	Race	Ethnicity	G	V	J	F	A	PhoneNumber
ADAM LPALYS	9115	ELECTRICIAN---	25027 CLARE CIR	MANHATTAN IL 60442	White	N H L	M	No	No	Yes	No	7086997140
STEPHEN RROMAN	4373	ELECTRICIAN---	18526 MARTIN AVE	HOMEWOOD IL 60430	White	N H L	M	Yes	Yes	No	No	7085433199
DAVID PROMAN	2439	ELECTRICIAN---	18010 HOMEWOOD AVE	HOMEWOOD IL 60430	White	N H L	M	No	No	Yes	No	7089353009

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
ADAM LPALYS	P	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00		0.00	95.29		2794.65	1793.52	
	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		21.25	Health		18.13		Vacation		0.00		Training		1.38				
Hourly Other Ins		5.50	15AddOT		0.00		20AddOT		0.00								
STEPHEN RROMAN	P	3.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00		0.00	86.62		3349.51	2266.02	
	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		21.25	Health		18.13		Vacation		0.00		Training		1.38				
Hourly Other Ins		5.50	15AddOT		0.00		20AddOT		0.00								
DAVID PROMAN	P	4.00	1.00	0.00	0.00	0.00	0.00	0.00	2.00	3.00		63.53	95.29		3684.75	2470.81	
	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		21.25	Health		18.13		Vacation		0.00		Training		1.38				
Hourly Other Ins		5.50	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

Dana Shinkle



Case #: 25-CTP-294633

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

Payroll Date	Project Location
7/21/2025 to 7/27/2025	635 OLMSTEAD LN
FEIN or Contractor Number	UNIVERSITY PARK IL 60484
2964568	
Project Number or Name	State Capital Funds
210300-22004	No
Agency	
Education, Board of	

Contractor and/or Subcontractor

Company Name	Contractor Location
ELECTRICAL SYSTEMS, INC.	17335 ASHLAND AVE
Contact Name	EAST HAZEL CREST IL 60429
DANA SHINKLE	
Primary Email	Secondary Email
DSHINKLE@ESIPOWER.COM	DSHINKLE@ESIPOWER.COM
Primary Phone	Secondary Phone
7086471300	

Public Body Information

Public Body Name	Public Body Address
CRETE-MONEE SCHOOL DISTRICT 201-U, MIDDLE SCHOOL	690 W EXCHANGE ST
Contact Name	CRETE IL 60417
Primary Phone	Secondary Phone

Employee Details

Name	Last4SSN	Classification	Address	City	Race	Ethnicity	G	V	J	F	A	PhoneNumber
NEIL ABERGERON	4234	ELECTRICIAN---	25258 FARADAY RD	MANHATTAN IL 60442	White	N H L	M	No	No	Yes	No	7089353025
ADAM LPALYS	9115	ELECTRICIAN---	25027 CLARE CIR	MANHATTAN IL 60442	White	N H L	M	No	No	Yes	No	7086997140
DAVID PROMAN	2439	ELECTRICIAN---	18010 HOMEWOOD AVE	HOMEWOOD IL 60430	White	N H L	M	No	No	Yes	No	7089353009

G-GenderV-VeteranJ-JourneymanF-ForemanA-Apprentice

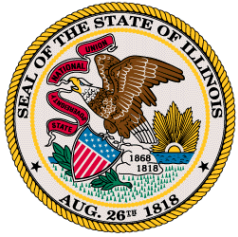
N H L- Not Hispanic or Latino
H L- Hispanic or Latino

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
NEIL ABERGER ON	P	2.00	2.00	0.00	0.00	2.00	7.00	0.00	4.00	9.00		63.53	95.29		3589.45	2243.94	
	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		21.25	Health		18.13		Vacation		0.00		Training		1.38				
Hourly Other Ins		5.50	15AddOT		0.00		20AddOT		0.00								
ADAM LPALYS	P	2.00	0.00	0.00	0.00	2.00	0.00	0.00	2.00	2.00		63.53	95.29		2922.38	1860.91	
	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		21.25	Health		18.13		Vacation		0.00		Training		1.38				
Hourly Other Ins		5.50	15AddOT		0.00		20AddOT		0.00								
DAVID PROMAN	P	2.00	0.00	0.00	0.00	2.00	7.00	0.00	2.00	9.00		63.53	95.29		3600.65	2426.62	
	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		21.25	Health		18.13		Vacation		0.00		Training		1.38				
Hourly Other Ins		5.50	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

DANA SHINKLE



Case #: 25-CTP-294686

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

Payroll Date	Project Location
7/28/2025 to 8/3/2025	635 OLMSTEAD LN
FEIN or Contractor Number	UNIVERSITY PARK IL 60484
362964568	
Project Number or Name	State Capital Funds
210300-22004	No
Agency	
Education, Board of	

Contractor and/or Subcontractor

Company Name	Contractor Location
ELECTRICAL SYSTEMS, INC.	17335 ASHLAND AVE
Contact Name	EAST HAZEL CREST IL 60429
DANA SHINKLE	
Primary Email	Secondary Email
DSHINKLE@ESIPOWER.COM	DSHINKLE@ESIPOWER.COM
Primary Phone	Secondary Phone
7086471300	

Public Body Information

Public Body Name	Public Body Address
CRETE-MONEE SCHOOL DISTRICT 201-U, MIDDLE SCHOOL	690 W EXCHANGE ST
Contact Name	CRETE IL 60417
Primary Phone	Secondary Phone

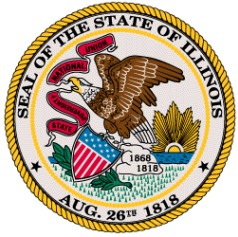
Employee Details												
Name	Last4SSN	Classification	Address	City	Race	Ethnicity	G	V	J	F	A	PhoneNumber
NEIL ABERGERON	4234	ELECTRICIAN---	25258 FARADAY RD	MANHATTAN IL 60442	White	N H L	M	No	No	Yes	No	7089353025
ADAM LPALYS	9115	ELECTRICIAN---	25027 CLARE CIR	MANHATTAN IL 60442	White	N H L	M	No	No	Yes	No	7086997140
G-Gender		V-Veteran			J-Journeyman			F-Foreman			A-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
NEIL ABERGERON	P	0.00	0.00	0.00	9.00	10.00	5.00	0.00	16.00	8.00		63.53	95.29		2890.63	1826.37	
	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		21.25		Health		18.13		Vacation		0.00		Training		1.38			
Hourly Other Ins		5.50		15AddOT		0.00		20AddOT		0.00							
ADAM LPALYS	P	0.00	0.00	0.00	9.00	10.00	5.00	0.00	16.00	8.00		63.53	95.29		2287.09	1485.66	
	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		21.25		Health		18.13		Vacation		0.00		Training		1.38			
Hourly Other Ins		5.50		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

DANA SHINKLE

Sep 08, 2025



Case #: 25-CTP-294721

Illinois Department of Labor

160 N. LaSalle St Suite1300
Chicago, IL 60601

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CERTIFIED TRANSCRIPT OF PAYROLL FORM

PAY PERIOD

Payroll Date	Project Location
8/4/2025 to 8/10/2025	635 OLMSTEAD LN
FEIN or Contractor Number	UNIVERSITY PARK IL 60484
362964568	
Project Number or Name	State Capital Funds
210300-22004	No
Agency	
Education, Board of	

Contractor and/or Subcontractor

Company Name	Contractor Location
ELECTRICAL SYSTEMS, INC.	17335 ASHLAND AVE
Contact Name	EAST HAZEL CREST IL 60429
DANA SHINKLE	
Primary Email	Secondary Email
DSHINKLE@ESIPOWER.COM	DSHINKLE@ESIPOWER.COM
Primary Phone	Secondary Phone
7086471300	

Public Body Information

Public Body Name	Public Body Address
CRETE-MONEE SCHOOL DISTRICT 201-U, MIDDLE SCHOOL	690 W EXCHANGE ST
Contact Name	CRETE IL 60417
Primary Phone	Secondary Phone

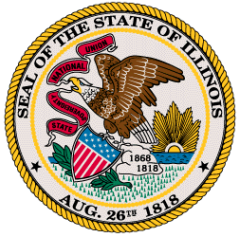
Employee Details												
Name	Last4SSN	Classification	Address	City	Race	Ethnicity	G	V	J	F	A	PhoneNumber
NEIL ABERGERON	4234	ELECTRICIAN---	25258 FARADAY RD	MANHATTAN IL 60442	White	N H L	M	No	No	Yes	No	7089353025
ADAM LPALYS	9115	ELECTRICIAN---	25027 CLARE CIR	MANHATTAN IL 60442	White	N H L	M	No	No	Yes	No	7086997140
G-Gender		V-Veteran			J-Journeyman		F-Foreman			A-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
NEIL ABERGER ON	P	8.00	0.00	2.00	0.00	0.00	0.00	0.00	10.00	0.00		63.53	0.00		3303.58	2071.48	
	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		21.25		Health		18.13		Vacation		0.00		Training		1.38			
Hourly Other Ins		5.50		15AddOT		0.00		20AddOT		0.00							
ADAM LPALYS	P	8.00	0.00	0.00	0.00	0.00	0.00	0.00	8.00	0.00		63.53	0.00		3303.58	2090.85	
	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		21.25		Health		18.13		Vacation		0.00		Training		1.38			
Hourly Other Ins		5.50		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

DANA SHINKLE

Sep 08, 2025



Case #: 25-CTP-294748

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

Payroll Date	Project Location
8/11/2025 to 8/17/2025	635 OLMSTEAD LN
FEIN or Contractor Number	UNIVERSITY PARK IL 60484
362964568	
Project Number or Name	State Capital Funds
210300-22004	No
Agency	
Education, Board of	

Contractor and/or Subcontractor

Company Name	Contractor Location
ELECTRICAL SYSTEMS, INC.	17335 ASHLAND AVE
Contact Name	EAST HAZEL CREST IL 60429
DANA SHINKLE	
Primary Email	Secondary Email
DSHINKLE@ESIPOWER.COM	DSHINKLE@ESIPOWER.COM
Primary Phone	Secondary Phone
7086471300	

Public Body Information

Public Body Name	Public Body Address
CRETE-MONEE SCHOOL DISTRICT 201-U, MIDDLE SCHOOL	690 W EXCHANGE ST
Contact Name	CRETE IL 60417
Primary Phone	Secondary Phone

Employee Details												
Name	Last4SSN	Classification	Address	City	Race	Ethnicity	G	V	J	F	A	PhoneNumber
NEIL ABERGERON	4234	ELECTRICIAN---	25258 FARADAY RD	MANHATTAN IL 60442	White	N H L	M	No	No	Yes	No	7089353025
ADAM LPALYS	9115	ELECTRICIAN---	25027 CLARE CIR	MANHATTAN IL 60442	White	N H L	M	No	No	Yes	No	7086997140
G-Gender		V-Veteran			J-Journeyman			F-Foreman			A-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
NEIL ABERGERON	P	0.00	2.00	0.00	4.00	0.00	0.00	0.00	4.00	2.00		63.53	95.29		3589.47	2243.95	
	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		21.25		Health		18.13		Vacation		0.00		Training		1.38			
Hourly Other Ins		5.50		15AddOT		0.00		20AddOT		0.00							
ADAM LPALYS	P	0.00	2.00	0.00	4.00	0.00	0.00	0.00	4.00	2.00		63.53	95.29		3208.29	2033.38	
	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		21.25		Health		18.13		Vacation		0.00		Training		1.38			
Hourly Other Ins		5.50		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

DANA SHINKLE

Sep 08, 2025



Case #: 25-CTP-238526

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

Payroll Date	Project Location
7/20/2025 to 7/26/2025	635 OLMSTEAD LN
FEIN or Contractor Number	UNIVERSITY PARK IL 60484
16-1771813	
Project Number or Name	State Capital Funds
Crete-Monee SD#201U, Middle School - Breakout Rooms	No
Agency	
Not a State Agency	

Contractor and/or Subcontractor

Company Name	Contractor Location
JLDC Construction Inc	4616 138TH ST
Contact Name	CRESTWOOD IL 60418
Robin Wachowski	
Primary Email	Secondary Email
accounting@jldcconstruction.com	
Primary Phone	Secondary Phone
7089262030	

Public Body Information

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

Employee Details

Name	Last4SSN	Classification	Address	City	Race	Ethnicity	G	V	J	F	A	PhoneNumber
Arturo Cardenas	9843	Foreman	216 WILDWOOD DR	NORTH AURORA IL 60542	Hispanic or Latino	H L	M	No	No	Yes	No	7083087894
Jose Castro Rodriguez	1721	Foreman	3825 W 77TH ST	CHICAGO IL 60652	Hispanic or Latino	H L	M	No	No	Yes	No	7734740044
Cesar Garcia Mendoza	7408	Journeyman	13011 SEELEY AVE	BLUE ISLAND IL 60406	Hispanic or Latino	H L	M	No	Yes	No	No	7083515034
Richard Iacullo	0511	Foreman	633 BUSHRUN CT	LAKE ZURICH IL 60047	Hispanic or Latino	H L	M	No	No	Yes	No	8479101963
Cruz Luna	6260	Carpenter App 1st Yr	1522 RIDGE RD	HOMEWOOD IL 60430	Hispanic or Latino	H L	M	No	No	No	Yes	7085604512
Francisco Ramirez Garcia	5928	Carpenter Journeyman	2800 BROADWAY ST	BLUE ISLAND IL 60406	Hispanic or Latino	H L	M	No	Yes	No	No	7088707260
Eliseo Soto	9574	Carpenter Journeyman	3314 TULIP DR	HAZEL CREST IL 60429	Hispanic or Latino	H L	M	No	Yes	No	No	7084734111
Javier Uriostegi Gomez JR.	5776	Apprentice 4th	1902 ASH ST	WAUKEGAN IL 60087	Hispanic or Latino	H L	M	No	No	No	Yes	2247308656

A-Apprentice

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
Arturo Cardenas	P	0.00	0.00	0.00	0.00	0.00	7.00	0.00	7.00	7.00		58.71	88.06		3187.53	2198.12	
	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	

0.93

0.00

Jose Castro Rodriguez	P	0.00	0.00	0.00	0.00	0.00	7.00	0.00	7.00	7.00		58.71	88.06		3026.21	2063.28	
	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	

0.93

0.00

Cesar Garcia Mendoza	P	0.00	0.00	0.00	0.00	0.00	7.00	0.00	7.00	7.00		56.71	85.06		3775.60	2589.28	
	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	16.91		Health		13.64		Vacation		2.61		Training		0.93			
	Hourly Other Ins	11.07		15AddOT		0.00		20AddOT		0.00							

Richard Iacullo	P	0.00	0.00	0.00	0.00	8.00	7.00	0.00	15.00	7.00		58.71	88.06		2413.01	1737.41	
	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	16.91				Health	13.64		Vacation	2.61		Training	0.93				
	Hourly Other Ins	11.07			15AddOT	0.00			20AddOT	0.00							

Cruz Luna	P	0.00	0.00	0.00	0.00	8.00	7.00	0.00	15.00	7.00		22.68	34.02		1268.01	863.81	
	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	16.91		Health		13.64		Vacation		2.61		Training		0.93			
	Hourly Other Ins	11.07		15AddOT		0.00		20AddOT		0.00							

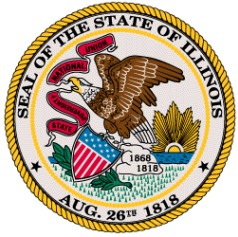
Francisco Ramirez Garcia	P	0.00	0.00	0.00	0.00	0.00	7.00	0.00	7.00	7.00		56.71	85.06		2986.53	2049.70	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00		0.00	0.00	
	Pension		16.91		Health		13.64		Vacation		2.61		Training		0.93		
	Hourly Other Ins		11.07		15AddOT		0.00		20AddOT		0.00						

Eliseo Soto	P	0.00	0.00	0.00	0.00	0.00	4.00	0.00	4.00	4.00		56.71	85.06		3424.90	2396.71	
	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	16.91		Health		13.64		Vacation		2.61		Training		0.93			
	Hourly Other Ins	11.07		15AddOT		0.00		20AddOT		0.00							

Javier Uriostegi Gomez JR.	P	0.00	0.00	0.00	0.00	0.00	7.00	0.00	7.00	7.00		58.71	88.06		3087.53	1918.11	
	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	16.91		Health		13.64		Vacation		2.61		Training		0.93			
	Hourly Other Ins	11.07		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

Robin Wachowski
Jul 31, 2025



Case #: 25-CTP-249753

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

Payroll Date	Project Location
7/27/2025 to 8/2/2025	635 OLMSTEAD LN
FEIN or Contractor Number	UNIVERSITY PARK IL 60484
16-1771813	No Work Report: Yes
Project Number or Name	State Capital Funds
Crete-Monee SD#201U, Middle School - Breakout Rooms	No
Agency	
Not a State Agency	

Contractor and/or Subcontractor

Company Name	Contractor Location
JLDC Construction Inc	4616 138TH ST
Contact Name	CRESTWOOD IL 60418
Robin Wachowski	
Primary Email	Secondary Email
accounting@jldcconstruction.com	
Primary Phone	Secondary Phone
7089262030	

Public Body Information

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

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

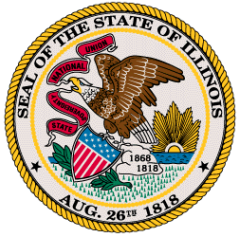
G-GenderV-VeteranJ-JourneymanF-ForemanA-Apprentice

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

Robin Wachowski
Aug 08, 2025



Case #: 25-CTP-263573

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

Payroll Date	Project Location
8/3/2025 to 8/9/2025	635 OLMSTEAD LN
FEIN or Contractor Number	UNIVERSITY PARK IL 60484
16-1771813	No Work Report: Yes
Project Number or Name	State Capital Funds
Crete-Monee SD#201U, Middle School - Breakout Rooms	No
Agency	
Not a State Agency	

Contractor and/or Subcontractor

Company Name	Contractor Location
JLDC Construction Inc	4616 138TH ST
Contact Name	CRESTWOOD IL 60418
Robin Wachowski	
Primary Email	Secondary Email
accounting@jldcconstruction.com	
Primary Phone	Secondary Phone
7089262030	

Public Body Information

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

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

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Robin Wachowski
Aug 18, 2025