

Olivencia, Mildred

From: efraass@ualocal475.org
Sent: Friday, June 26, 2015 12:31 PM
To: Olivencia, Mildred
Cc: Torres-Rojas, Genara; Van Duyne, Sheree; Ng, Danny
Subject: Freedom of Information Online Request Form

Information:

First Name: Ed
Last Name: Fraass
Company: Union Business Agent
Mailing Address 1: 136 Mt. Bethal Road
Mailing Address 2:
City: Warren
State: NJ
Zip Code: 07059
Email Address: efraass@ualocal475.org
Phone: 908-754-1030
Required copies of the records: Yes

List of specific record(s):

Certified Payroll Project EWR-154.183 Conti Enterprises

THE PORT AUTHORITY OF NY & NJ

FOI Administrator

July 22, 2015

Mr. Ed Fraass
UA Local 475
136 Mt. Bethal Road
Warren, NJ 07059

Re: Freedom of Information Reference No. 16115

Dear Mr. Fraass:

This is in response to your June 6, 2015 request, which has been processed under the Port Authority's Freedom of Information Code (the "Code", copy enclosed) for a copy of the Certified Payroll for Project No. EWR-154.183 Conti Enterprises.

Material responsive to your request and available under the Code can be found on the Port Authority's website at <http://www.panynj.gov/corporate-information/foi/16115-C.pdf>. Paper copies of the available records are available upon request.

Pursuant to the Code, certain portions of the material responsive to your request are exempt from disclosure as, among other classifications, personal privacy.

Please refer to the above FOI reference number in any future correspondence relating to your request.

Very truly yours,



Danny Ng
FOI Administrator

Enclosure

*4 World Trade Center, 18th Floor
150 Greenwich Street
New York, NY 10007
T: 212 435 7348 F: 212 435 7555*

18

EWR-154.183
As Submitted
w/APP #2

Statement of Compliance

Date 3/4/2015

I, **BRENDA DAVIS** **PAYROLL MANAGER** do hereby state:
(Name of signatory party) (Title)

That I pay or supervise the payment of the persons employed by **CONTI ENTERPRISES, INC.** on the **EWR 154.183 Aviation Fuel System**
(Contractor or subcontractor) (Building or work)

That during the payroll period commencing on the 22nd day of February 2015 and ending the 28th day of February 2015, 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 **CONTI ENTERPRISES, INC.** from the full weekly wages earned by any person and that
(Contractor or Subcontractor)

No deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act. As amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c) and described below:

FED, FICA, SUI, SIT, UNION DUES, HEALTH INS., APPLICABLE GARNISHES

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

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

4. That:
(a) **WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS.**

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

(b) **WHERE FRINGE BENEFITS ARE PAID IN CASH**

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

(c) **EXCEPTIONS**

EXCEPTION (CRAFT)	EXPLANATION

Remarks

BRENDA DAVIS/PAYROLL MANAGER
(Name and Title)

Brenda Davis
(Signature)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENT MAY SUBJECT TO THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SECTION 1001 OF TITLE 18 SECTIONS 231 OF TITLE 31 OF THE UNITED STATES CODE.

Statement of Compliance

Date 3/4/2015

I, **BRENDA DAVIS** **PAYROLL MANAGER** do hereby state:
(Name of signatory party) (Title)

That I pay or supervise the payment of the persons employed by **CONTI ENTERPRISES, INC.** on the **EWB 154.183 Aviation Fuel System**
(Contractor or subcontractor) (Building or work)

That during the payroll period commencing on the 22nd day of February 2015 and ending the 28th day of February 2015, 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 **CONTI ENTERPRISES, INC.** from the full weekly wages earned by any person and that
(Contractor or Subcontractor)

No deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act. As amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c) and described below:

FED, FICA, SUI, SIT, UNION DUES, HEALTH INS., APPLICABLE GARNISHES

2. That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.
3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a state apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

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

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

(b) **WHERE FRINGE BENEFITS ARE PAID IN CASH**

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

(c) **EXCEPTIONS**

EXCEPTION (CRAFT)

EXPLANATION

Remarks

BRENDA DAVIS/PAYROLL MANAGER

(Name and Title)



(Signature)

THE WILLFULL FALSIFICATION OF ANY OF THE ABOVE STATEMENT MAY SUBJECT TO THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SECTION 1001 OF TITLE 18 SECTIONS 231 OF TITLE 31 OF THE UNITED STATES CODE.

EWR-154.183
As Submitted
W/AFP #3

Statement of Compliance

Date 3/11/2015

I, **BRENDA DAVIS** **PAYROLL MANAGER** do hereby state:
(Name of signatory party) (Title)

That I pay or supervise the payment of the persons employed by **CONTI ENTERPRISES, INC.** on the **EWR 154.183 Aviation Fuel System**
(Contractor or subcontractor) (Building or work)

That during the payroll period commencing on the 1st day of March 2015 and ending the 7th day of March 2015, 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 **CONTI ENTERPRISES, INC.** from the full weekly wages earned by any person and that
(Contractor or Subcontractor)

No deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act. As amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c) and described below:

FED, FICA, SUI, SIT, UNION DUES, HEALTH INS., APPLICABLE GARNISHES

- 2. That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.
- 3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a state apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

4. That:

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

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

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

Remarks

BRENDA DAVIS/PAYROLL MANAGER

(Name and Title)



(Signature)

THE WILLFULL FALSIFICATION OF ANY OF THE ABOVE STATEMENT MAY SUBJECT TO THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SECTION 1001 OF TITLE 18 SECTIONS 231 OF TITLE 31 OF THE UNITED STATES CODE.

RSSCENTPR
BDAVIS

The Conti Group
Certified Payroll Register

Conti Enterprises, Inc. - EWR 154,183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor
Project and Location 1407600
EWR154,183 Aviation Fuel Sys
Newark NJ
Contract No: 69950373

Pay Period Ending Date 03/07/2015
GL Period Number 10
Payroll Number 2

Name and Address	State	Fed	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All projects Worked
				SU	MO	TU	WE	TH	FR	SA				To Union	This Project	
Antonio Garcia		4	LBJ Straight Pay								472	32.00	1,144.00			125960 Gross Wages 1,430.00
			CLAP													Federal Inco
			Defined Cont													Federal FICA
			H & S Fund													Federal Medi
			Pension													NJ Departmen
			Welfare													NJ State Unem
			LBCEI													NJ Paid Leave
			SET Fund													NJ Disabilit
			Vacation													Dues
																LEROF
																PAC
																Total Deduct
																Net Pay
																Hrs This Ckr
Job Totals for Antonio Garcia													32.00	1,144.00		40.00
Totals for Job 1407600													32.00	1,144.00		

EWR154,183 Aviation Fuel Sys

Statement of Compliance

Date 3/11/2015

I, **BRENDA DAVIS** **PAYROLL MANAGER** do hereby state:
(Name of signatory party) (Title)

That I pay or supervise the payment of the persons employed by **CONTI ENTERPRISES, INC.** on the **EWR 154.183 Aviation Fuel System**
(Contractor or subcontractor) (Building or work)

That during the payroll period commencing on the 1st day of March 2015 and ending the 7th day of March 2015, 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 **CONTI ENTERPRISES, INC.** from the full weekly wages earned by any person and that
(Contractor or Subcontractor)

No deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act. As amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c) and described below:

FED, FICA, SUI, SIT, UNION DUES, HEALTH INS., APPLICABLE GARNISHES

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

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

4. That:

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

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

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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

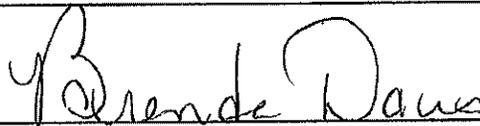
(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

Remarks

BRENDA DAVIS/PAYROLL MANAGER

(Name and Title)



(Signature)

THE WILLFULL FALSIFICATION OF ANY OF THE ABOVE STATEMENT MAY SUBJECT TO THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SECTION 1001 OF TITLE 18 SECTIONS 231 OF TITLE 31 OF THE UNITED STATES CODE.

RSSCENTER
BDAVIS

The Govt Group
Certified Payroll Register

Comt Enterprises, Inc. ENR 154.183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor

Project and Location 1407600
EWR154.183 Aviation Fuel Sys
Newark NJ

Contract No: 69950373

Pay Period Ending Date 03/07/2015
GL Period Number 10
Payroll Number 2

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All projects Worked	
				SU	MO	TU	WE	TH	FR	SA				To Union This Project	Total Gross Pay & Deductions for All projects Worked		
Aurora Gracia		4	LRI Straight Pay	1	2	3	4	5	6	7	Local: 472	32.00	NJ Laborers H & G	1,144.00		1,144.00	125060
			Benefit														1,430.00
			CIAP														
			Defined Cont														
			H & S Fund														
			Pension														
			Welfare														
			LECET														
			SET Fund														
			Vacation														
Job Totals for Aurora Gracia												32.00		1,144.00		1,144.00	40.00
Totals for Job 1407600												32.00		1,144.00		1,144.00	40.00

Payment Number: 125060
Gross Wages 1,430.00
Federal Inco
Federal FICA
Federal Medi
NJ Department
NJ State Un
NJ Paid Lav
NJ Disablit
Dues
LEROF
PAC
Total Deduct
Net Pay
His This Chk

Statement of Compliance

Date 3/18/2015

I, **BRENDA DAVIS** **PAYROLL MANAGER** do hereby state:
(Name of signatory party) (Title)

That I pay or supervise the payment of the persons employed by **CONTI ENTERPRISES, INC.** on the **EWR 154.183 Aviation Fuel System**
(Contractor or subcontractor) (Building or work)

That during the payroll period commencing on the **8TH** day of **March 2015** and ending the **14TH** day of **March 2015**, 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 **CONTI ENTERPRISES, INC.** from the full weekly wages earned by any person and that
(Contractor or Subcontractor)

No deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act. As amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c) and described below:

FED, FICA, SUI, SIT, UNION DUES, HEALTH INS., APPLICABLE GARNISHES

2. That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.
3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a state apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

4. That:

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

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

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

Remarks

BRENDA DAVIS/PAYROLL MANAGER

(Name and Title)



(Signature)

THE WILLFULL FALSIFICATION OF ANY OF THE ABOVE STATEMENT MAY SUBJECT TO THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SECTION 1001 OF TITLE 18 SECTIONS 231 OF TITLE 31 OF THE UNITED STATES CODE.

R55CERTPR
BDAVIS

The Conti Group
Certified Payroll Register

03/17/2015 14:12:28
Page - 1

Conti Enterprises, Inc - EWR 154,183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor
Project and Location 1407600
EWR154,183 Aviation Fuel Sys
Newark NJ
Contract No: 69950373

Pay Period Ending Date 03/14/2015
GL Period Number 11
Payroll Number 3

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All projects Worked	
				SU	MO	TU	WE	TH	FR	SA				To Union This Project	Payment Number:		
Antonio Grace			LBJ								472						125159
			Straight Pay								16.00		572.00				1,298.75
			CLAP														
			Defined Cont														
			H & S Fund														
			Pension														
			Welfare														
			LECRET														
			SET Fund														
			Vacation														
Job Totals for Antonio Grace											16.00		572.00				34.00
Totals for Job 1407600											16.00		572.00				34.00

Payment Number: 125159
Gross Wages 1,298.75
Federal Inco
Federal FICA
NJ Departmen
NJ State Un
NJ Paid Leav
NJ Disabili
Dues
LEROF
PAC
Total Deduct:
Net Pay
Frc This Chk

Statement of Compliance

Date 3/18/2015

I, **BRENDA DAVIS** **PAYROLL MANAGER** do hereby state:
(Name of signatory party) (Title)

That I pay or supervise the payment of the persons employed by **CONTI ENTERPRISES, INC.** on the **EWR 154.183 Aviation Fuel System**
(Contractor or subcontractor) (Building or work)

That during the payroll period commencing on the **8TH** day of **March 2015** and ending the **14TH** day of **March 2015**, 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 **CONTI ENTERPRISES, INC.** from the full weekly wages earned by any person and that
(Contractor or Subcontractor)

No deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act. As amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c) and described below:

FED, FICA, SUI, SIT, UNION DUES, HEALTH INS., APPLICABLE GARNISHES

2. That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.
3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a state apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

4. That:

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

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

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

Remarks

BRENDA DAVIS/PAYROLL MANAGER

(Name and Title)



(Signature)

THE WILLFULL FALSIFICATION OF ANY OF THE ABOVE STATEMENT MAY SUBJECT TO THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SECTION 1001 OF TITLE 18 SECTIONS 231 OF TITLE 31 OF THE UNITED STATES CODE.

Statement of Compliance

Date 3/25/2015

I, **BRENDA DAVIS** PAYROLL MANAGER do hereby state:
 (Name of signatory party) (Title)

That I pay or supervise the payment of the persons employed by **CONTI ENTERPRISES, INC.** on the EWR 154.183 Aviation Fuel System
 (Contractor or subcontractor) (Building or work)

That during the payroll period commencing on the 15TH day of March 2015 and ending the 21ST day of March 2015, 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 **CONTI ENTERPRISES, INC.** from the full weekly wages earned by any person and that
 (Contractor or Subcontractor)

No deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act. As amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c) and described below:

FED, FICA, SUI, SIT, UNION DUES, HEALTH INS., APPLICABLE GARNISHES

2. That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.
3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a state apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

4. That:

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

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

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

Remarks

BRENDA DAVIS/PAYROLL MANAGER

(Name and Title)



(Signature)

THE WILLFULL FALSIFICATION OF ANY OF THE ABOVE STATEMENT MAY SUBJECT TO THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SECTION 1001 OF TITLE 18 SECTIONS 231 OF TITLE 31 OF THE UNITED STATES CODE.

R55CERTPR
BD/AVIS

The Const Group
Certified Payroll Register

Cont: Enterprises, Inc - EWR 154.183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor

Project and Location 1407500
EWR154.183 Aviation Fed Sys
Newark NJ
Contract No: 69950373

Pay Period Ending Date 03/21/2015
GL Period Number 12
Payroll Number 4

Name and Address	State	Fed	Pay	Exempt	Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All projects Worked
						ST	MO	TU	WE	TH	FR	SA				ZI	To Union This Project	
Kevin Lamago			LABJ Straight Pay										4.00		143.00			125291 Gross Wages 1,144.00
			CIAP															Federal Inco
			Design Cont															Federal FICA
			H & S Fund															Federal Medh
			Pension															NJ Departmen
			Welfare															NJ State Unv
			LECT															NJ Paid Leav
			SEI Fund															NJ Disablit
			Vacation															Dues
																		LEROF
																		PAC
																		Total Deduc
																		Net Pay
																		Hrs This Chk
Job Totals for Kevin Lamago													4.00		143.00			32.00
Totals for Job 1407500													4.00		143.00			

EWR154.183 Aviation Fed Sys

Statement of Compliance

Date 3/25/2015

I, **BRENDA DAVIS** **PAYROLL MANAGER** do hereby state:
(Name of signatory party) (Title)

That I pay or supervise the payment of the persons employed by **CONTI ENTERPRISES, INC.** on the **EWR 154.183 Aviation Fuel System**
(Contractor or subcontractor) (Building or work)

That during the payroll period commencing on the **15TH** day of **March 2015** and ending the **21ST** day of **March 2015**, 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 **CONTI ENTERPRISES, INC.** from the full weekly wages earned by any person and that
(Contractor or Subcontractor)

No deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act. As amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c) and described below:

FED, FICA, SUI, SIT, UNION DUES, HEALTH INS., APPLICABLE GARNISHES

2. That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.
3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a state apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

4. That:

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

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

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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

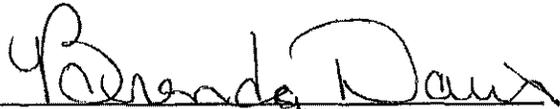
(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

Remarks

BRENDA DAVIS/PAYROLL MANAGER

(Name and Title)



(Signature)

THE WILLFULL FALSIFICATION OF ANY OF THE ABOVE STATEMENT MAY SUBJECT TO THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SECTION 1001 OF TITLE 18 SECTIONS 231 OF TITLE 31 OF THE UNITED STATES CODE.

Statement of Compliance

Date 4/8/2015

I, **BRENDA DAVIS** **PAYROLL MANAGER** do hereby state:
(Name of signatory party) (Title)

That I pay or supervise the payment of the persons employed by **CONTI ENTERPRISES, INC.** on the **EWR 154.183 Aviation Fuel System**
(Contractor or subcontractor) (Building or work)

That during the payroll period commencing on the **29th** day of **March 2015** and ending the **4th** day of **April 2015**, 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 **CONTI ENTERPRISES, INC.** from the full weekly wages earned by any person and that
(Contractor or Subcontractor)

No deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act. As amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c) and described below:

FED, FICA, SUI, SIT, UNION DUES, HEALTH INS., APPLICABLE GARNISHES

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

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

4. That:

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

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

(b) **WHERE FRINGE BENEFITS ARE PAID IN CASH**

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

(c) **EXCEPTIONS**

EXCEPTION (CRAFT)	EXPLANATION

Remarks

BRENDA DAVIS/PAYROLL MANAGER
(Name and Title)

Brenda Davis
(Signature)

THE WILLFULL FALSIFICATION OF ANY OF THE ABOVE STATEMENT MAY SUBJECT TO THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SECTION 1001 OF TITLE 18 SECTIONS 231 OF TITLE 31 OF THE UNITED STATES CODE.

Statement of Compliance

Date 4/8/2015

I, **BRENDA DAVIS** **PAYROLL MANAGER** do hereby state:
(Name of signatory party) (Title)

That I pay or supervise the payment of the persons employed by **CONTI ENTERPRISES, INC.** on the **EWR 154.183 Aviation Fuel System**
(Contractor or subcontractor) (Building or work)

That during the payroll period commencing on the **29th** day of **March 2015** and ending the **4th** day of **April 2015**, 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 **CONTI ENTERPRISES, INC.** from the full weekly wages earned by any person and that
(Contractor or Subcontractor)

No deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act. As amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c) and described below:

FED, FICA, SUI, SIT, UNION DUES, HEALTH INS., APPLICABLE GARNISHES

2. That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.
3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a state apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

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

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

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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

(c) EXCEPTIONS

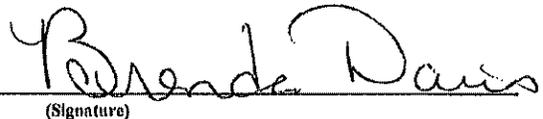
EXCEPTION (CRAFT)

EXPLANATION

Remarks

BRENDA DAVIS/PAYROLL MANAGER

(Name and Title)


(Signature)

THE WILLFULL FALSIFICATION OF ANY OF THE ABOVE STATEMENT MAY SUBJECT TO THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SECTION 1001 OF TITLE 18 SECTIONS 231 OF TITLE 31 OF THE UNITED STATES CODE.

Statement of Compliance

Date 4/8/2015

I, **BRENDA DAVIS** **PAYROLL MANAGER** do hereby state:
(Name of signatory party) (Title)

That I pay or supervise the payment of the persons employed by **CONTI ENTERPRISES, INC.** on the **EWR 154.183 Aviation Fuel System**
(Contractor or subcontractor) (Building or work)

That during the payroll period commencing on the 29th day of March 2015 and ending the 4th day of April 2015, 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 **CONTI ENTERPRISES, INC.** from the full weekly wages earned by any person and that
(Contractor or Subcontractor)

No deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act. As amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c) and described below:

FED, FICA, SUI, SIT, UNION DUES, HEALTH INS., APPLICABLE GARNISHES

2. That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.
3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a state apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

4. That:

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

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

(b) **WHERE FRINGE BENEFITS ARE PAID IN CASH**

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

(c) **EXCEPTIONS**

EXCEPTION (CRAFT)

EXPLANATION

Remarks

BRENDA DAVIS/PAYROLL MANAGER

(Name and Title)



(Signature)

THE WILLFULL FALSIFICATION OF ANY OF THE ABOVE STATEMENT MAY SUBJECT TO THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SECTION 1001 OF TITLE 18 SECTIONS 231 OF TITLE 31 OF THE UNITED STATES CODE.

RS5CERTPR
BDAYS

The Cont Group
Certified Payroll Register

Contl Enterprises, Inc. - EWR 154.183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor

Project and Location 1407600
EWR154.183 Aviation Fuel Sys
Newark NJ

Contract No: 69950373

Pay Period Ending Date 04/04/2015
GL Period Number 14
Payroll Number 6

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All projects Worked
				SU	MO	TU	WE	TH	FR	SA				To Union This Project	Total	

Timothy Franlhan		4	LBS Straight Pay										16.00	578.40			259321
			CFAP														
			Defined Cont														
			H & S Fund														
			Pension														
			Welfare														
			LECTER														
			SET Fund														
			Reverse 4085														
			Vacation														
			Auto Allow														

Gender: Male
Race: White (Not of Hispanic Origin)

Job Totals for Timothy Houhnan
Totals for Job 1407600 EWR154.183 Aviation Fuel Sys

8.00	8.00	16.00	578.40														
8.00	8.00	16.00	578.40														
																	41.50

Payment Number: 259321
Gross Wages: 1,527.35
Federal Inco
Federal FICA
Federal Medi
NJ Department
NJ State Un
NJ Paid Leav
NJ Disabilt
Child Supprt
Child Supprt
Child Supp fee
Child Supp fee
Dues
LEROF
PAC
Total Deduct
Net Pay
Pw This Clk

ENR-154.183
AS submitted
W/AFP # 4

18

Statement of Compliance

Date 4/8/2015

I, **BRENDA DAVIS** **PAYROLL MANAGER** do hereby state:
(Name of signatory party) (Title)

That I pay or supervise the payment of the persons employed by **CONTI ENTERPRISES, INC.** on the **ENR 154.183 Aviation Fuel System**
(Contractor or subcontractor) (Building or work)

That during the payroll period commencing on the **29th** day of **March** 2015 and ending the **4th** day of **April** 2015, 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 **CONTI ENTERPRISES, INC.** from the full weekly wages earned by any person and that
(Contractor or Subcontractor)

No deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act. As amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c) and described below:

FED, FICA, SUI, SIT, UNION DUES, HEALTH INS., APPLICABLE GARNISHES

- 2. That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.
- 3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a state apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

4. That:

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

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

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

Remarks

BRENDA DAVIS/PAYROLL MANAGER

(Name and Title)

(Signature)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENT MAY SUBJECT TO THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SECTION 1001 OF TITLE 18 SECTIONS 231 OF TITLE 31 OF THE UNITED STATES CODE.

R35CENTER
BD AVIS

The Conti Group
Certified Payroll Register

Conti Enterprises, Inc. - EWR 154.183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor
Project and Location 1407600
EWR154.183 Aviation Fuel Sys
Newark NJ
Contract No: 69950373

Pay Period Ending Date 04/04/2015
GL Period Number 14
Payroll Number 6

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid To Union This Project	Total Gross Pay & Deductions for All Projects Worked
				SU	MO	TU	WE	TH	FR	SA					

Timothy Houbman		4	I.B.S. Straight Pay	29	30	31	1	2	3	4	16.00	578.40		259321
			CLAP											
			Defined Cont											
			H & S Fund											
			Pension											
			Welfare											
			LEICER											
			SEI Fund											
			Reverse 4085											
			Vacation											
			Auto Allow											

Job Totals for Timothy Houbman 8.00 8.00 16.00 578.40 41.50

Totals for Job 1407600 EWR154.183 Aviation Fuel Sys 8.00 8.00 16.00 578.40

Payment Number: 259321
Gross Wages 1,527.35
Federal Inco
Federal EICA
Federal Medt
NJ Department
NJ State Use
NJ Paid Leave
NJ Disability
Child Support
Child Support
Child Sup fee
Child Sup fee
Dues
LEICER
PAC
Total Deduct
Net Pay
EHS This Chk

Statement of Compliance

Date 4/15/2015

I, **BRENDA DAVIS** **PAYROLL MANAGER** do hereby state:
(Name of signatory party) (Title)

That I pay or supervise the payment of the persons employed by **CONTI ENTERPRISES, INC.** on the **EWR 154.183 Aviation Fuel System**
(Contractor or subcontractor) (Building or work)

That during the payroll period commencing on the **5th** day of **April 2015** and ending the **11th** day of **April 2015**, 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 **CONTI ENTERPRISES, INC.** from the full weekly wages earned by any person and that
(Contractor or Subcontractor)

No deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act. As amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c) and described below:

FED, FICA, SUI, SIT, UNION DUES, HEALTH INS., APPLICABLE GARNISHES

2. That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.
3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a state apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

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

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

Remarks

BRENDA DAVIS/PAYROLL MANAGER

(Name and Title)



(Signature)

THE WILLFULL FALSIFICATION OF ANY OF THE ABOVE STATEMENT MAY SUBJECT TO THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SECTION 1001 OF TITLE 18 SECTIONS 231 OF TITLE 31 OF THE UNITED STATES CODE.

R55CERTPR
BDAVIS

The Const Group
Certified Payroll Register

Cont Enterprises, Inc. - EWR 154.183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor

Project and Location 1407600
EWR154.183 Aviation Fuel Sys
Newark NJ
Contract No: 69950373

Pay Period Ending Date 04/11/2015
GL Period Number 15
Payroll Number 7

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid To Union This Project	Total Gross Pay & Deductions for All Projects Worked Net Pay	
				SU	MO	TU	WE	TH	FR	SA						
Kevin Lamego			IBJ Straight Pay Overtime													
Gender: Male Race: White (Not of Hispanic Origin)			CLAP Defined Cont H & S Fund Pension Welfare LECET SET Fund Vacation													
Job Totals for Kevin Lamego				8.00	8.00	8.00	8.00	8.00	8.00	8.00	42.00	1,537.25			42.00	

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid To Union This Project	Total Gross Pay & Deductions for All Projects Worked Net Pay
				SU	MO	TU	WE	TH	FR	SA					
Timothy Honihan			IBJ Straight Pay Overtime												
Gender: Male Race: White (Not of Hispanic Origin)			CLAP Defined Cont H & S Fund Pension Welfare LECET SET Fund Vacation												
Job Totals for Timothy Honihan				8.00	8.00	8.00	8.00	8.00	8.00	8.00	42.00	1,537.25			42.00

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid To Union This Project	Total Gross Pay & Deductions for All Projects Worked Net Pay
				SU	MO	TU	WE	TH	FR	SA					
David Marconi			OEC Straight Pay Annuity ST Apprentice ST Pension ST SUB Fund ST Welfare ST Lab MGMT ST IAB ST Savings ST												
Gender: Male Race: White (Not of Hispanic Origin)			Operator Engineer C Local: 325 NJ Operators												
Job Totals for David Marconi				8.00	8.00	8.00	8.00	8.00	8.00	8.00	42.00	681.12			681.12

Payment Number:	125659
Gross Wages	681.12
Federal Inco	
Federal FICA	
Federal Medi	
NJ Departmen	
NJ State Une	
NJ Paid Leav	
NJ Disabili	
Dues	
PAC	
Total Deduct	
Net Pay	16.00
Hrs This Chk	16.00

R55CERTPR
BDANTS

The Conit Group
Certified Payroll Register

Conit Enterprises, Inc.- EWR 154.183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor _____
Project and Location 1407600
EWR154.183 Aviation Fuel Sys
Newark NJ
Contract No: 69950373

Pay Period Ending Date 04/11/2015
GL Period Number 15
Payroll Number 7

Name and Address	State	Fed	Pay Type	Day and Date							Total Hours	Rate	Gross Pay	Benefits Paid	Total Gross Pay & Deductions for All projects Worked				
				ST	MO	TU	WE	TH	FR	SA									
Jose Purificano			IBJ	5	6	7	8	9	10	11	472		558.00	125888	1553.25				
			LABOR								2.00		107.25						
			CLAP																
			Defined Cont																
			H & S Fund																
			Pension																
			Welfare																
			LECFE																
			SET Fund																
			Vacation																
Job Totals for Jose Purificano													8.00	10.00	8.00	26.00	965.25		42.00

Name and Address	State	Fed	Pay Type	Day and Date							Total Hours	Rate	Gross Pay	Benefits Paid	Total Gross Pay & Deductions for All projects Worked			
				ST	MO	TU	WE	TH	FR	SA								
Edward Rubio			OEA								825		737.12	259667				
			Straight Pay								8.00		8.00	2084.69				
			Overtime								2.00		2.00					
			Annuity OT															
			Apprentice ST															
			Apprentice OT															
			Pension ST															
			Pension OT															
			SUB Fund ST															
			SUB Fund OT															
			Welfare OT															
			Welfare ST															
			Lab MGMT OT															
			Lab MGMT ST															
			IAP OT															
			IAP ST															
			Savings OT															
			Savings ST															
Job Totals for Edward Rubio													8.00	10.00	18.00	875.34		43.50

R55CERTPR
BDAVIS

The Conti Group
Certified Payroll Register

Conti Enterprises, Inc - EWR 154,183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor
Project and Location
EWR154,183 Aviation Fuel Sys
Newark NJ
Contract No: 69950373

1407600
EWR154,183 Aviation Fuel Sys
Newark NJ
Contract No: 69950373
Pay Period Ending Date 04/11/2015
GL Period Number 15
Payroll Number 7

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All projects Worked
				SU	MO	TU	WE	TH	FR	SA				To Union This Project	Total	

Giberto Grada Gender: Male Race: White (Not of Hispanic Origin)	NJ		OEAs	SU	MO	TU	WE	TH	FR	SA	825	NJ Operators	1,842.80	125641		1,911.91			
			Straight Pay	8.00	8.00	8.00	8.00	8.00	8.00	40.00	Gross Wages								
			Overtime					1.00		1.00	Federal Inco								
			Amnity OT								Federal FICA								
			Amnity ST								Federal Medi								
			Apprentice OT								NJ Department								
			Apprentice ST								NJ State Une								
			Pension OT								NJ Paid Leav								
			Pension ST								NJ Disability								
			SUB Fund OT								Dues								
SUB Fund ST								BAC											
Welfare OT								Total Deduct		41.00									
Welfare ST								Net Pay											
Lab MGMT OT								This This Chk											
Lab MGMT ST																			
LAP OT																			
LAP ST																			
Savings OT																			
Savings ST																			
Benefit																			
Job Totals for			Giberto Grada									8.00	8.00	8.00	9.00	8.00	41.00	1,911.91	

Timothy Houlhan Gender: Male Race: White (Not of Hispanic Origin)	NJ	4	LBS	SU	MO	TU	WE	TH	FR	SA	472	NJ Laborers H & G	686.85	259621		1,798.47
			Straight Pay	3.00	8.00	8.00	8.00	8.00	8.00	19.00	Gross Wages					
			Overtime					2.00		2.00	Federal Inco					
			CIAP								Federal FICA					
			Defined Cont								Federal Medi					
			H & S Fund								NJ Department					
			Pension								NJ State Une					
			Welfare								NJ Paid Leav					
			LBCET								NJ Disability					
			SET Fund								Dues					
Reverse 4085								LEROF								
Vacation								BAC								
Auto Allow								Total Deduct								

R55CERTPR
BDAY15

The Count Group
Certified Payroll Register

Conti Enterprises, Inc.- EWR 154,183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor
Project and Location 1407600
EWR154,183 Aviation Fuel Sys
Newark NJ

Contract No: 69950373

Pay Period Ending Date 04/11/2015
GL Period Number 15
Payroll Number 7

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid To Union This Project	Total Gross Pay & Deductions for All projects Worked	Net Pay
				ST	MO	TU	WE	TH	FR	SA						
Kevin Lamago			LABJ	5	6	7	8	9	10	11	21.00	795.50		46.50		
Job Totals for											21.00	795.50		46.50		

Kevin Lamago
Gender: Male
Race: White (Not of Hispanic Origin)

LABJ Labor Journeyman Local: 472
Straight Pay 8.00 8.00 8.00 8.00 8.00 40.00 NJ Laborers H & G 1,450.00
Overtime 2.00 107.25
CLAP Benefit
Defined Cont Benefit
H & S Fund Benefit
Pension Benefit
VetLare Benefit
LECCET Benefit
SET Fund Benefit
Vacation Benefit

Payment Number: 259636
Gross Wages 1,537.25
Federal Inco
Federal FICA
Federal Medi
NJ Department
NJ State Line
NJ Paid Law
NJ Disability
Dues
LEROF
PAC
Total Deduct
Net Pay
His This Chk 42.00

Job Totals for Kevin Lamago 8.00 8.00 8.00 10.00 8.00 42.00 1,537.25 42.00

David Marconi
Gender: Male
Race: White (Not of Hispanic Origin)

OEC Operator Engineer C Local: 825
Straight Pay 8.00 8.00 16.00 NJ Operators 681.12
Annuity ST Benefit
Apprentice ST Benefit
Pension ST Benefit
SUDS Fund ST Benefit
Welfare ST Benefit
Lab MGMT ST Benefit
IAP ST Benefit
Savings ST Benefit

Payment Number: 125659
Gross Wages 681.12
Federal Inco
Federal FICA
Federal Medi
NJ Department
NJ State Line
NJ Paid Law
NJ Disability
Dues
PAC
Total Deduct
Net Pay
His This Chk 16.00

Job Totals for David Marconi 8.00 8.00 16.00 681.12 16.00

R55CERTPR
BDAVTS

The Conit Group
Certified Payroll Register

Conit Enterprises, Inc. - EWR 154,183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor

Project and Location 1407600
EWR154,183 Aviation Fuel Sys
Newark NJ

Contract No: 69950373

Pay Period Ending Date 04/11/2015
GL Period Number 15
Payroll Number 7

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid To Union This Project	Total Gross Pay & Deductions for All projects Worked			
				ST	MO	TU	WE	TH	FR	SA								
Robert White		4	LBJ	5	6	7	8	9	10	11	Local: 472	16.00	572.00		259692			
			Overtime					2.00				2.00	107.25		1,555.85			
			CIAP															
			Defined Cont															
			H & S Fund															
			Pension															
			Waikare															
			LECET															
			SET Fund															
			Vacation															
			LBPT															
			Labor Power Tools									8.00	291.50		42.00			
			Straight Pay															
			CIAP															
			Defined Cont															
			H & S Fund															
			Pension															
			Waikare															
			LECET															
			SET Fund															
			Vacation															
Job Totals for Robert White												8.00	970.85					
Totals for Job	1407600	EWR154,183 Aviation Fuel Sys										16.00	19.00	40.00	67.00	48.00	190.00	7,737.02

Statement of Compliance

Date 4/29/2015

I, **BRENDA DAVIS** **PAYROLL MANAGER** do hereby state:
(Name of signatory party) (Title)

That I pay or supervise the payment of the persons employed by **CONTI ENTERPRISES, INC.** on the **EWR 154.183 Aviation Fuel System**
(Contractor or subcontractor) (Building or work)

That during the payroll period commencing on the 19th day of April 2015 and ending the 25th day of April 2015, 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 **CONTI ENTERPRISES, INC.** from the full weekly wages earned by any person and that
(Contractor or Subcontractor)

No deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act. As amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c) and described below:

FED, FICA, SUI, SIT, UNION DUES, HEALTH INS., APPLICABLE GARNISHES

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

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

4. That:

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

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

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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

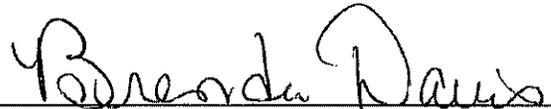
(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

Remarks

BRENDA DAVIS/PAYROLL MANAGER

(Name and Title)



(Signature)

THE WILLFULL FALSIFICATION OF ANY OF THE ABOVE STATEMENT MAY SUBJECT TO THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SECTION 1001 OF TITLE 18 SECTIONS 231 OF TITLE 31 OF THE UNITED STATES CODE.

**NEW JERSEY DEPARTMENT OF TRANSPORTATION
STATEMENT OF COMPLIANCE**

Date: May 5, 2015

I, Carlos A. Medina, President do hereby state:
(Name of signatory party) (Title)

(1) That I pay or supervise the payment of the persons employed by Robinson Aerial Surveys, Inc. on
(Contractor of Subcontractor)
the Newark Liberty Int'l Airport ; that during the payroll period commencing on the 6th day of April 20 15 and
(Project Name)
ending the 12th day of April 20 15 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 Robinson Aerial Surveys, Inc.
(Contractor of Subcontractor)

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

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

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

(4) That:

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

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

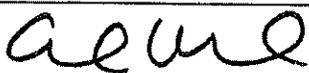
(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS

NAME AND TITLE Carlos A. Medina, President	SIGNATURE 
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The willful falsification of any of the above statements may subject the contractor or subcontractor to civil or criminal prosecution. See Section 100 of Title 18 and Section 231 of the United States Code.

**NEW JERSEY DEPARTMENT OF TRANSPORTATION
STATEMENT OF COMPLIANCE**

Date: May 5, 2015

I, Carlos A. Medina, President do hereby state:
(Name of signatory party) (Title)

(1) That I pay or supervise the payment of the persons employed by Robinson Aerial Surveys, Inc. on
(Contractor of Subcontractor)
the Newark Liberty Int'l Airport ; that during the payroll period commencing on the 13th day of April 20 15 and
(Project Name)
ending the 19th day of April 20 15 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 Robinson Aerial Surveys, Inc.
(Contractor of Subcontractor)
from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages
earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of
Labor under the Copeland Act, as amended (48 Stat. 108, 72 Stat. 967; 76Stat 357; 40 U.S.C. §3145) and described below:

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

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

(4) That:

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

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

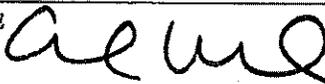
(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS

NAME AND TITLE Carlos A. Medina, President	SIGNATURE 
---	---

The willful falsification of any of the above statements may subject the contractor or subcontractor to civil or criminal prosecution. See Section 100 of Title 18 and Section 231 of the United States Code.

NEW JERSEY DEPARTMENT OF TRANSPORTATION STATEMENT OF COMPLIANCE

Date: May 5, 2015

I, Carlos A. Medina, President do hereby state:
(Name of signatory party) (Title)

(1) That I pay or supervise the payment of the persons employed by Robinson Aerial Surveys, Inc. on
(Contractor of Subcontractor)
 the Newark Liberty Int'l Airport ; that during the payroll period commencing on the 20th day of April 20 15 and
(Project Name)
 ending the 26th day of April 20 15 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 Robinson Aerial Surveys, Inc.
(Contractor of Subcontractor)
 from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages
 earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of
 Labor under the Copeland Act, as amended (48 Stat. 108, 72 Stat. 967; 76Stat 357; 40 U.S.C. §3145) and described below:

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

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

(4) That:

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

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

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS

NAME AND TITLE
 Carlos A. Medina, President

SIGNATURE 

**NEW JERSEY DEPARTMENT OF TRANSPORTATION
STATEMENT OF COMPLIANCE**

Date: May 5, 2015

I, Carlos A. Medina, President do hereby state:
(Name of signatory party) (Title)

(1) That I pay or supervise the payment of the persons employed by Robinson Aerial Surveys, Inc. on
(Contractor of Subcontractor)
the Newark Liberty Int'l Airport; that during the payroll period commencing on the 27th day of April 20 15 and
(Project Name)
ending the 3rd day of May 20 15 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 Robinson Aerial Surveys, Inc.
(Contractor of Subcontractor)

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

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

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

(4) That:

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

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

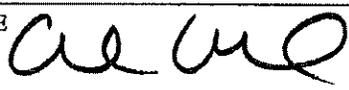
(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS

NAME AND TITLE Carlos A. Medina, President	SIGNATURE 
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The willful falsification of any of the above statements may subject the contractor or subcontractor to civil or criminal prosecution. See Section 100 of Title 18 and Section 231 of the United States Code.

Statement of Compliance

I do hereby state:

1. That I, Lou Paolocco, Treasurer, during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Ferreira Construction Company Inc (Name of Contractor), and that 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 Ferreira Construction Company Inc (name of contractor) from the full weekly wages earned by any person, other than permissible deductions, including, but not limited to: Federal Withholding, FICA, Medicare, State Disability Insurance, Union Deductions, Child Support or Other Garnishments.

2. That any payrolls
raises contained in any wage

3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program.

4. That a. WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS
In addition to

grams for the benefit of such in the contract, or such employees, except as noted in Section 4(c) below.

b. WHERE FRINGE BENEFITS ARE PAID IN CASH

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

c. EXCEPTIONS:

EXCEPTION (GRAFT)

EXPLANATION

LINDA KISSELL
NOTARY PUBLIC
STATE OF NEW JERSEY
MY COMMISSION EXPIRES DEC. 3, 2019

General Contractor: Partridge Construction Company Inc
Sub-Contractor: Partridge Construction Company Inc
Contract Number: DP 154-153
Registration Number: B-0000

Job Code: 220
Job Title: Road Brooming, NJ 07076
Contract Start Date: 04-05-15
Contract End Date: 04-05-15
Project Name & Location: Partridge Airport, Linden Field
Address: 3 Brewster Road
City: Newark, NJ

Form No: 254-0255
Page: 1

Employee Name: Doug Harozak

Week	Start	End	Day	Rate	Hours	Total	Base Pay	Benefit	Total										
1	04-05-15	04-11-15	Tue	4.00	1.00	4.00	4.00	0.00	4.00	0.00	4.00	0.00	4.00	0.00	4.00	0.00	4.00	0.00	4.00
2	04-12-15	04-18-15	Wed	4.00	1.00	4.00	4.00	0.00	4.00	0.00	4.00	0.00	4.00	0.00	4.00	0.00	4.00	0.00	4.00
3	04-19-15	04-25-15	Thu	4.00	1.00	4.00	4.00	0.00	4.00	0.00	4.00	0.00	4.00	0.00	4.00	0.00	4.00	0.00	4.00
4	04-26-15	05-02-15	Fri	4.00	1.00	4.00	4.00	0.00	4.00	0.00	4.00	0.00	4.00	0.00	4.00	0.00	4.00	0.00	4.00
5	05-03-15	05-09-15	Sat	4.00	1.00	4.00	4.00	0.00	4.00	0.00	4.00	0.00	4.00	0.00	4.00	0.00	4.00	0.00	4.00
Total							20.00	0.00	20.00										

Total for CONTRACTOR Airport Linden Field
Hours: 5.00
Rate: 4.00
Total Pay: 20.00
Deductions: 0.00
Net Pay: 20.00

This certified payroll has been prepared in accordance with the instructions contained on the reverse side of this form. I understand that falsification of this statement is a punishable offense.

Signature: *[Signature]*
Name: Doug Harozak
Title: Foreman

LINDA KISSELL
NOTARY PUBLIC
STATE OF NEW JERSEY
MY COMMISSION EXPIRES DEC. 3, 2019

[Signature]
Date: 05-08-15

Statement of Compliance

I do hereby state:

1. That I, Lou Pacheco, Treasurer, during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Ferreira Construction Company Inc (Name of Contractor), and that 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 Ferreira Construction Company Inc (name of contractor) from the full weekly wages earned by any person, other than permissible deductions, including but not limited to: Federal Withholding, FICA, Medicare, State Withholding, State Disability Insurance, Union Deductions, Child Support or Other Garnishments.

2. That any payrolls rates contained in any wage

3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program.

4. ^{That} ₂ WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS
In addition to

grams for the benefit of such in the contract, of such employees, except as noted in Section 4(c) below.

b. WHERE FRINGE BENEFITS ARE PAID IN CASH

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

c. EXCEPTIONS:

EXCEPTION (GRAFD)

EXPLANATION

LINDA KISSELL
NOTARY PUBLIC
STATE OF NEW JERSEY
MY COMMISSION EXPIRES DEC. 3, 2019

General Contractor: **Everline Construction Company Inc** 21 Ramsey Road Hightstown, NJ 08520 908-521-8855
 Sub-Contractor: **Everline Construction Company Inc** 21 Ramsey Road Hightstown, NJ 08520 908-521-8855
 Contract Number: **EM 154,183** Job Code: **Rock Baking Date** Project Name: **Keokoa**
 Registration Number: **2388** 220 04-26-15 CONTRACTOR: **Alford Aviation Svcs**
 3 Riverport Road Newark, NJ

EMPLOYEES: **GENE MARONZAK**

GENE MARONZAK
 Male 04-20 04-21 04-22 04-23 04-24 04-25 04-26 04-27 04-28 04-29 04-30
 04-20 04-21 04-22 04-23 04-24 04-25 04-26 04-27 04-28 04-29 04-30
 4.00 4.00 4.00 4.00 4.00 4.00 4.00 4.00 4.00 4.00 4.00
 Total Gross Pay: 2,222.71
 Total Tax & Other Deductions: 0.00
 Net Pay: 2,222.71
 Available Vacation/Dues: 0.00
 All Other Pay: 0.00

WILLIAM JOHNSON
 Male 04-20 04-21 04-22 04-23 04-24 04-25 04-26 04-27 04-28 04-29 04-30
 04-20 04-21 04-22 04-23 04-24 04-25 04-26 04-27 04-28 04-29 04-30
 2.00 2.00 2.00 2.00 2.00 2.00 2.00 2.00 2.00 2.00 2.00
 Total Gross Pay: 1,976.79
 Total Tax & Other Deductions: 0.00
 Net Pay: 1,976.79
 Available Vacation/Dues: 0.00
 All Other Pay: 0.00

JOSE BULLER
 Male 04-20 04-21 04-22 04-23 04-24 04-25 04-26 04-27 04-28 04-29 04-30
 04-20 04-21 04-22 04-23 04-24 04-25 04-26 04-27 04-28 04-29 04-30
 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00
 Total Gross Pay: 1,128.89
 Total Tax & Other Deductions: 0.00
 Net Pay: 1,128.89
 Available Vacation/Dues: 0.00
 All Other Pay: 0.00

RAMON RAMAZ
 Male 04-20 04-21 04-22 04-23 04-24 04-25 04-26 04-27 04-28 04-29 04-30
 04-20 04-21 04-22 04-23 04-24 04-25 04-26 04-27 04-28 04-29 04-30
 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00
 Total Gross Pay: 1,870.02
 Total Tax & Other Deductions: 0.00
 Net Pay: 1,870.02
 Available Vacation/Dues: 0.00
 All Other Pay: 0.00

LANDREW J. KOPPEL
 Male 04-20 04-21 04-22 04-23 04-24 04-25 04-26 04-27 04-28 04-29 04-30
 04-20 04-21 04-22 04-23 04-24 04-25 04-26 04-27 04-28 04-29 04-30
 4.00 4.00 4.00 4.00 4.00 4.00 4.00 4.00 4.00 4.00 4.00
 Total Gross Pay: 2,042.29
 Total Tax & Other Deductions: 0.00
 Net Pay: 2,042.29
 Available Vacation/Dues: 0.00
 All Other Pay: 0.00

This certified payroll has been prepared in accordance with the instructions contained in the award agreement and the applicable contract documents. I certify that the above information represents the actual and verifiable information of this statement as a purchasable document.

Signature: *[Handwritten Signature]* Name: **Gene Maronzak** Title: **Treasurer** Date: **05-08-15**

LINDA KISSELL
 NOTARY PUBLIC
 STATE OF NEW JERSEY
 MY COMMISSION EXPIRES DEC. 3, 2019

As submitted w/ AFP #5

Statement of Compliance

Date 5/13/2015

I, **BRENDA DAVIS** PAYROLL MANAGER do hereby state:
(Name of signatory party) (Title)

That I pay or supervise the payment of the persons employed by **CONTI ENTERPRISES, INC.** on the EWR 154.183 Aviation Fuel System
(Contractor or subcontractor) (Building or work)

That during the payroll period commencing on the 3rd day of May 2015 and ending the 9th day of May 2015, 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 **CONTI ENTERPRISES, INC.** from the full weekly wages earned by any person and that
(Contractor or Subcontractor)

No deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act. As amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c) and described below:

FED, FICA, SUI, SIT, UNION DUES, HEALTH INS., APPLICABLE GARNISHES

- 2. That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.
- 3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a state apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

4. That:

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

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

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

Remarks

BRENDA DAVIS/PAYROLL MANAGER
(Name and Title)

Brenda Davis
(Signature)

THE WILLFULL FALSIFICATION OF ANY OF THE ABOVE STATEMENT MAY SUBJECT TO THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SECTION 1001 OF TITLE 18 SECTIONS 231 OF TITLE 31 OF THE UNITED STATES CODE.

Conti Enterprises, Inc - EWR 154.183 Contractor X
 2045 LINCOLN HIGHWAY Sub-Contractor
 EDISON NJ 08817 Newark NJ
 Project and Location 1407600
 EWR154.183 Aviation Fuel Sys
 Newark NJ
 Contract No: 69950373
 Pay Period Ending Date 05/09/2015
 GL Period Number 19
 Payroll Number 9

Name and Address	State	Fed	Pay	Exempt	Day and Date									Total Hours	Rate	Gross Pay This Project	Benefits Paid To Union This Project	Total Gross Pay & Deductions for All Projects Worked
					SU	MO	TU	WE	TH	FR	SA	9	Hours					
Job Totals for Gilberto Genda																		
Gilberto Genda OEA Operator Engineer A Straight Pay 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 Annuity ST Benefit Apprenticeship ST Benefit Pension ST Benefit SUB Fund ST Benefit Welfare ST Benefit Lab MGMT ST Benefit IAP ST Benefit Savings ST Benefit Local: 825 NJ Operators 24.00 472 NJ Laborers H & G 24.00 Total 24.00 Gross Pay This Project 1,105.68 Benefits Paid To Union This Project 111.60 Total Gross Pay & Deductions for All Projects Worked 1,261.13 Payment Number: 126113 Gross Wages 1,842.80 Federal Inco Federal FITCA Federal Medi NJ Department Dues 306.00 PAC 18.00 Total Deduct 1.92 Net Pay 24.00 His This Clk 40.00																		

Name and Address	State	Fed	Pay	Exempt	Day and Date									Total Hours	Rate	Gross Pay This Project	Benefits Paid To Union This Project	Total Gross Pay & Deductions for All Projects Worked
					SU	MO	TU	WE	TH	FR	SA	9	Hours					
Job Totals for Kevin Lamago																		
Kevin Lamago LBJ Labor Journeyman Straight Pay 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 8.00 CLAP Benefit Defined Cont Benefit H & S Fund Benefit Pension Benefit Welfare Benefit IECRET Benefit SET Fund Benefit Vacation Benefit Local: 825 NJ Operators 24.00 472 NJ Laborers H & G 24.00 Total 24.00 Gross Pay This Project 858.00 Benefits Paid To Union This Project 630.72 Total Gross Pay & Deductions for All Projects Worked 40.00 Payment Number: 266873 Gross Wages 1,958.25 Federal Inco Federal FITCA Federal Medi NJ Department NJ State Un NJ Paid Lev NJ Disabill Dues IEROF PAC Total Deduct Net Pay His This Clk																		

David Marconi OEC Operator Engineer C
 Straight Pay 3.00
 Annuity ST Benefit
 Apprenticeship ST Benefit
 Pension ST Benefit
 SUB Fund ST Benefit
 Welfare ST Benefit
 Local: 825 NJ Operators 5.00
 472 NJ Laborers H & G 5.00
 Total 5.00
 Gross Pay This Project 212.85
 Benefits Paid To Union This Project
 Total Gross Pay & Deductions for All Projects Worked
 Payment Number: 266873
 Gross Wages 1,958.25
 Federal Inco
 Federal FITCA
 Federal Medi
 NJ Department
 NJ State Un

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The Conti Group
Certified Payroll Register

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Conti Enterprises, Inc - EWR 154.183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor
Sub-Contractor

Project and Location 1407600
EWR154.183 Aviation Fuel Sys
Newark NJ
Contract No: 69950373

Pay Period Ending Date 05/09/2015
GL Period Number 19
Payroll Number 9

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All projects Worked	
				SU	MO	TU	WE	TH	FR	SA				To Union This Project	NI Paid Leave		
Lab MGMT ST				3	4	5	6	7	8	9							
LAP ST																	
Savings ST																	
Job Totals for David Marconi											3.00	2.00	5.00	212.85			
Totals for Job 1407600 EWR154.183 Aviation Fuel Sys											19.00	16.00	53.00	2,176.53			44.00

NI Paid Leave
NI Disabillty
Dues
PAC
Total Deduct
Net Pay
His This Clk

Statement of Compliance

Date 5/13/2015

I, **BRENDA DAVIS** PAYROLL MANAGER do hereby state:
(Name of signatory party) (Title)

That I pay or supervise the payment of the persons employed by **CONTI ENTERPRISES, INC.** on the **EWR 154.183 Aviation Fuel System**
(Contractor or subcontractor) (Building or work)

That during the payroll period commencing on the 3rd day of May 2015 and ending the 9th day of May 2015, 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 **CONTI ENTERPRISES, INC.** from the full weekly wages earned by any person and that
(Contractor or Subcontractor)

No deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act. As amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c) and described below:

FED, FICA, SUI, SIT, UNION DUES, HEALTH INS., APPLICABLE GARNISHES

2. That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.
3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a state apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.
4. That:
- (a) **WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS.**

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

(b) **WHERE FRINGE BENEFITS ARE PAID IN CASH**

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

(c) **EXCEPTIONS**

EXCEPTION (CRAFT)	EXPLANATION

Remarks

BRENDA DAVIS/PAYROLL MANAGER
(Name and Title)


(Signature)

THE WILLFULL FALSIFICATION OF ANY OF THE ABOVE STATEMENT MAY SUBJECT TO THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SECTION 1001 OF TITLE 18 SECTIONS 231 OF TITLE 31 OF THE UNITED STATES CODE.

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The Conis Group
Certified Payroll Register

Conis Enterprises, Inc - EWR 154.183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor
Sub-Contractor

Project and Location
EWR154.183 Aviation Fuel Sys
 Newark NJ

Contract No: 69950373

Pay Period Ending Date 05/09/2015
GL Period Number 19
Payroll Number 9

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All projects Worked		
				STU	MO	TU	WTE	TH	FR	SA				To Union This Project	Total Deduct			
			Lab MGMT ST	3	4	5	6	7	8	9								
			IAP ST															
			Savings ST															
Job Totals for David Marconi												3.00	2.80	5.00	212.85			44.00
Totals for Job 1407600	EWR154.183 Aviation Fuel Sys											19.00	16.00	53.00	2176.53			

Statement of Compliance

Date 5/20/2015

I, **BRENDA DAVIS** PAYROLL MANAGER do hereby state:
 (Name of signatory party) (Title)

That I pay or supervise the payment of the persons employed by **CONTI ENTERPRISES, INC.** on the EWR 154.183 Aviation Fuel System
 (Contractor or subcontractor) (Building or work)

That during the payroll period commencing on the 10th day of May 2015 and ending the 16th day of May 2015, 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 **CONTI ENTERPRISES, INC.** from the full weekly wages earned by any person and that
 (Contractor or Subcontractor)

No deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act. As amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c) and described below:

FED, FICA, SUI, SIT, UNION DUES, HEALTH INS., APPLICABLE GARNISHES

2. That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.
3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a state apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

4. That:
 (a) **WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS.**

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

(b) **WHERE FRINGE BENEFITS ARE PAID IN CASH**

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

(c) **EXCEPTIONS**

EXCEPTION (CRAFT)	EXPLANATION

Remarks

BRENDA DAVIS/PAYROLL MANAGER
 (Name and Title)


 (Signature)

THE WILLFULL FALSIFICATION OF ANY OF THE ABOVE STATEMENT MAY SUBJECT TO THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SECTION 1001 OF TITLE 18 SECTIONS 231 OF TITLE 31 OF THE UNITED STATES CODE.

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The Const Group
Certified Payroll Register

Cont Enterprises, Inc - EWR 154.183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor

Project and Location 1407600
EWR154.183 Aviation Fuel Sys
Newark NJ
Contract No: 69950373

Pay Period Ending Date 05/16/2015
GL Period Number 20
Payroll Number 10

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All projects Worked
				SU	MO	TU	WE	TH	FR	SA				To Union This Project	Total Deduct	
Jose Purificacio				10	11	12	13	14	15	16	8.00	286.00				43.00
Job Totals for Jose Purificacio 8.00 286.00 43.00																

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All projects Worked
				SU	MO	TU	WE	TH	FR	SA				To Union This Project	Total Deduct	
Robert White			4													
Job Totals for Robert White 3.00 8.00 8.00 24.00 858.00 40.00																
Totals for Job 1407600 EWR154.183 Aviation Fuel Sys 18.00 17.00 32.00 54.00 32.00 153.00 6,167.67																

Gender: Male
Race: White (Not of Hispanic Origin)

LABOR 472
Labor Journeymen
Straight Pay 8.00 8.00 8.00
CLAP Benefit
Defined Cont Benefit
H & S Fund Benefit
Pension Benefit
Welfare Benefit
LECTET Benefit
SET Fund Benefit
Vacation Benefit

Local: 472
NI Laborers H & G
Payment Number: 261224
Gross Wages 1,446.00
Federal Unco
Federal FICA
Federal Med
NJ Department
NJ State Un
NJ Paid Leave
NJ Disability
Dues
LEKOF
PAC
Total Deduct
Net Pay
Hrs This Ck
Brs This Ck

Statement of Compliance

Date 5/20/2015

I, **BRENDA DAVIS** PAYROLL MANAGER do hereby state:
(Name of signatory party) (Title)

That I pay or supervise the payment of the persons employed by **CONTI ENTERPRISES, INC.** on the EWR 154.183 Aviation Fuel System
(Contractor or subcontractor) (Building or work)

That during the payroll period commencing on the 10th day of May 2015 and ending the 16th day of May 2015, 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 **CONTI ENTERPRISES, INC.** from the full weekly wages earned by any person and that
(Contractor or Subcontractor)

No deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act. As amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c) and described below:

FED, FICA, SUI, SIT, UNION DUES, HEALTH INS., APPLICABLE GARNISHES

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

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

4. That:

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

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

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

Remarks

BRENDA DAVIS/PAYROLL MANAGER
(Name and Title)


(Signature)

THE WILLFULL FALSIFICATION OF ANY OF THE ABOVE STATEMENT MAY SUBJECT TO THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SECTION 1001 OF TITLE 18 SECTIONS 231 OF TITLE 31 OF THE UNITED STATES CODE.

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The Conit Group
Certified Payroll Register

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Conit Enterprises, Inc. - EWR 154.183 Contractor X Project and Location 1407600
 2045 LINCOLN HIGHWAY Sub-Contractor EWR154.183 Aviation Fuel Sys
 EDISON NJ 08837 Newark NJ
 Contract No: 69950373

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	To Union This Project	Total Gross Pay & Deductions for All projects Worked					
				ST	MO	TU	WE	TH	FR	SA										
Gilberto Genda Gender: Male Race: White (Not of Hispanic Origin)	NJ		OEA Operator Engineer A	10	11	12	13	14	15	16	40.00	1,842.80	126.237							
				Straight Pay 8.00 8.00 8.00 8.00 8.00 8.00											Gross Wages 1,842.80					
				Amnity ST Benefit											Federal Inco 267.58					
				Apprentice ST Benefit											Federal FICA 116.73					
				Pension ST Benefit											Federal Medi 27.30					
				SUB Fund ST Benefit											NJ Department 56.20					
				Welfare ST Benefit											Dues 55.28					
				Lab MGMT ST Benefit											PAC 9.21					
				IAP ST Benefit											Total Deduct 532.30					
				Savings ST Benefit											Net Pay 1,310.50					
Job Totals for Gilberto Genda											8.00	8.00	8.00	8.00	8.00	8.00	8.00	1,842.80		40.00

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	To Union This Project	Total Gross Pay & Deductions for All projects Worked					
				ST	MO	TU	WE	TH	FR	SA										
Antonio Graca Gender: Male Race: White (Not of Hispanic Origin)	NJ		IBJ Labor Journeyman	10	11	12	13	14	15	16	8.00	286.00	126.242							
				Straight Pay 8.00											Gross Wages 1,461.60					
				CIAP Benefit											Federal Inco					
				Defined Cont Benefit											Federal FICA					
				H & S Fund Benefit											Federal Medi					
				Pension Benefit											NJ Department					
				Welfare Benefit											NJ State Un					
				IBECET Benefit											NJ Paid Leav					
				SET Fund Benefit											NJ Disablt					
				Vacation Benefit											Dues					
Job Totals for Antonio Graca											8.00	8.00	8.00	8.00	8.00	8.00	8.00	286.00		40.00

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	To Union This Project	Total Gross Pay & Deductions for All projects Worked					
				ST	MO	TU	WE	TH	FR	SA										
Timothy Stonham Gender: Male Race: White (Not of Hispanic Origin)	NJ		IBS Labor Steward	10	11	12	13	14	15	16	6.00	216.90	261.155							
				Straight Pay 6.00											Gross Wages 1,473.11					
				CIAP Benefit											Federal Inco					
				Defined Cont Benefit											Federal FICA					
				H & S Fund Benefit											Federal Medi					
				Pension Benefit											NJ Department					
Job Totals for Timothy Stonham											6.00	6.00	6.00	6.00	6.00	6.00	6.00	216.90		40.00

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The Const Group
Certified Payroll Register

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Const Enterprises, Inc. - EWR 154.183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor
Project and Location 1407600
EWR154.183 Aviation Fuel Sys
Newark NJ

Contract No: 69950373

Pay Period Ending Date 05/16/2015
GL Period Number 20
Payroll Number 10

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All projects Worked		
				SU	MO	TU	WE	TH	FR	SA				To Union This Project	Total Deductions			
			IECET	10	11	12	13	14	15	16								
			SEI Fund															
			Revenue 4085															
			Vacation															
			Auto Allow															
Job Totals for Timothy Houbhan												6.00		6.00		216.90		40.50

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All projects Worked			
				SU	MO	TU	WE	TH	FR	SA				To Union This Project	Total Deductions				
Scott J Jacobs		1	OEA																
			Operator Engineer A																
			Straight Pay					8.00											
			Amnesty ST						8.00										
			Apprentice ST																
			Pension ST																
			STUB Fund ST																
			Welfare ST																
			Lab MGMT ST																
			IAP ST																
		Sewings ST																	
Job Totals for Scott J Jacobs								8.00					8.00		16.00		737.12		40.00

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All projects Worked					
				SU	MO	TU	WE	TH	FR	SA				To Union This Project	Total Deductions						
Kevin Janago			IEB																		
			Labor Journeyman																		
			Straight Pay					8.00													
			CIAP						8.00												
			Defined Cont																		
			H & S Fund																		
			Pension																		
			Welfare																		
			IECET																		
			SETI Fund																		
		Vacation																			
Job Totals for Kevin Janago								8.00					8.00		472		40.00		1,430.00		2611.62

Payment Number: 261162
 Gross Wages 1,430.00
 Federal Inco
 Federal FICA
 Federal Medt
 NJ Department
 NJ State Use
 NJ Paid Leave
 NJ Disability
 Dues
 IEROF

Conti Enterprises, Inc - EWR 154183 Contractor X Project and Location 1407600
 2045 LINCOLN HIGHWAY Sub-Contractor EWR154183 Aviation Fuel Sys Newark NJ
 EDISON NJ 08817 Newark NJ
 Contract No: 69950373
 Pay Period Ending Date 05/16/2015
 GL Period Number 20
 Payroll Number 10

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid To Union This Project	Total Gross Pay & Deductions for All projects Worked
				SU	MO	TU	WE	TH	FR	SA					
Job Totals for Kevin Launego												40.00	1,450.00		

David Marconi OEC Operator Engineer C Local: 825 NJ Operators Payment Number: 261175
 Straight Pay 1.00 8.00 Gross Wages 2,405.27
 Overtime 1.00 1.00 2.00 Federal Inco
 Annuity OT Benefit
 Annuity ST Benefit
 Apprentices OT Benefit
 Apprentices ST Benefit
 Pension OT Benefit
 Pension ST Benefit
 SUB Fund OT Benefit
 SUB Fund ST Benefit
 Welfare OT Benefit
 Welfare ST Benefit
 Lab MGMT OT Benefit
 Lab MGMT ST Benefit
 IAP OT Benefit
 IAP ST Benefit
 Savings OT Benefit
 Savings ST Benefit
 Job Totals for David Marconi 2.00 1.00 8.00 11.00 510.85

Jose Purificacio LBJ Labor Journeyman Local: 472 NJ Laborers H & G Payment Number: 126298
 Straight Pay Benefit Gross Wages 1,598.88
 CLAP Benefit Federal Inco
 Defined Cont Benefit Federal ETCA
 H & S Fund Benefit Federal Merit
 Pension Benefit NJ Department
 Welfare Benefit NJ State Use
 LBCT Benefit NJ Paid Leave
 SET Fund Benefit NJ Disability
 Vacation Benefit LEROF

RSCERTFR
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The Conti Group
Certified Payroll Register

Conti Enterprises, Inc - EWR 154.183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor

Project and Location 1407600
EWR154.183 Aviation Fuel Sys
Newark NJ
Contract No: 69950373

Pay Period Ending Date 05/16/2015
GL Period Number 20
Payroll Number 10

Name and Address	State	Fed	Pay	Day and Date							Total	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All projects Worked				
				ST	MO	TU	WE	TH	FR	SA				To Union	This Project					
Joe Purricavano				10	11	12	13	14	15	16	Hours		This Project							
Job Totals for													8.00		286.00					43.00

Robert White	4	IBJ	Labor Journeyman	Local: 472							NJ Laborers H & G	Payment Number:											
				ST	MO	TU	WE	TH	FR	SA			Gross Wages										
Gender: Male											261224												
Race: White (Not of Hispanic Origin)											1,446.00												
Straight Pay			8.00	8.00	8.00	8.00	8.00	8.00	8.00	24.00													
CLAP			Benefit																				
Defined Cont			Benefit																				
H & S Fund			Benefit																				
Pension			Benefit																				
Welfare			Benefit																				
LECRET			Benefit																				
SET Fund			Benefit																				
Vacation			Benefit																				
Job Totals for Robert White													8.00		8.00				24.00		858.00		40.00

Totals for Job 1407600 EWR154.183 Aviation Fuel Sys													18.00		1,770.00				32.00		54.00		32.00		153.00		6,167.67
---	--	--	--	--	--	--	--	--	--	--	--	--	-------	--	----------	--	--	--	-------	--	-------	--	-------	--	--------	--	----------

Statement of Compliance

Date 5/27/2015

I, **BRENDA DAVIS** PAYROLL MANAGER do hereby state:
(Name of signatory party) (Title)

That I pay or supervise the payment of the persons employed by **CONTI ENTERPRISES, INC.** on the EWR 154.183 Aviation Fuel System
(Contractor or subcontractor) (Building or work)

That during the payroll period commencing on the 17th day of May 2015 and ending the 23th day of May 2015, 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 **CONTI ENTERPRISES, INC.** from the full weekly wages earned by any person and that
(Contractor or Subcontractor)

No deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act. As amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c) and described below:

FED, FICA, SUI, SIT, UNION DUES, HEALTH INS., APPLICABLE GARNISHES

2. That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.
3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a state apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.
4. That:
- (a) **WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS.**

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

(b) **WHERE FRINGE BENEFITS ARE PAID IN CASH**

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

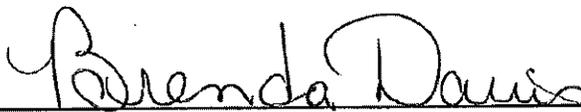
(c) **EXCEPTIONS**

EXCEPTION (CRAFT)	EXPLANATION

Remarks

BRENDA DAVIS/PAYROLL MANAGER

(Name and Title)



(Signature)

THE WILLFULL FALSIFICATION OF ANY OF THE ABOVE STATEMENT MAY SUBJECT TO THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SECTION 1001 OF TITLE 18 SECTIONS 231 OF TITLE 31 OF THE UNITED STATES CODE.

R55CERTK
PADELBYE

The Conn Group
Certified Payroll Register

Conn Enterprises, Inc. - EWR 154.183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor

Project and Location 1407600
EWR154.183 Aviation Fed Sys
Newark NJ
Contract No: 69950373

Pay Period Ending Date 05/23/2015
GL Period Number 21
Payroll Number 11

Name and Address	State	Fed	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	To Union This Project	Total Gross Pay & Deductions for All Projects Worked	
				ST	MO	TU	WE	TH	FR	SA						
Timothy Honohan		4	I BS	17	18	19	20	21	22	23	472		6.50	32.00	1,474.25	261.665
			Straight Pay		5.00			1.50			6.50		1.00	24.98	1,527.35	
			Overtime		1.00						1.00			54.23		
			CLAP													
			Defined Cont													
			H & S Fund													
			Pension													
			Welfare													
			LEICET													
			SEI Fund													
			Reverse 4085													
			Vacation													
			Auto Allow													

Job Totals for Timothy Honohan

6.00 1.50 7.50 299.21 41.50

Scott J Jacobs	1	OEA	Operator Engineer A	Local: 825	NJ Operators	Payment Number:	261.665
		Straight Pay	8.00	8.00	8.00	Gross Wages	1,474.25
		Annunty ST				Federal Inco	
		Apprentice ST				Federal FICA	
		Pension ST				Federal Medi	
		STUB Fund ST				NJ Department	
		Welfare ST				Dues	
		Lab M/GMT ST				PAC	
		IAP ST				Total Deduct	
		Savings ST				Net Pay	

Gender: Male
Race: Hispanic or Latino

8.00 8.00 8.00 32.00 1,474.25 32.00

Job Totals for Scott J Jacobs	1	LAB	Labor Journeyman	Local: 472	NJ Laborers H & G	Payment Number:	261.671
		Straight Pay	8.00	8.00	8.00	Gross Wages	1,483.63
		Overtime	1.00			Federal Inco	
		CLAP				Federal FICA	

His This Ck 32.00

Contractor: X Project and Location: 1407600
 Sub-Contractor: EWR154183 Aviation Fuel Sys
 EDISON NJ 08817 Newark NJ
 Contract No: 69950373

Pay Period Ending Date: 05/25/2015
 GL Period Number: 21
 Payroll Number: 11

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All Projects Worked		
				SU	MO	TU	WE	TH	FR	SA				To Union	This Project			
Gender: Male Race: White (Not of Hispanic Origin)			Pension ST	17	18	19	20	21	22	23							Federal Medt	
			Sub Fund ST														NJ Department	
			Welfare ST														NJ State Use	
			Lab MGMT ST														NJ Paid Leave	
			IAP ST														NJ Disability	
		Savings ST															Dues	
																	BAC	
																	Total Deduct	
																	Net Pay	
																		Hrs This Ckr

Job Totals for Steven M. Pettw 1.50 1.50 69.11 42.50

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All Projects Worked			
				SU	MO	TU	WE	TH	FR	SA				To Union	This Project				
Gender: Male Race: White (Not of Hispanic Origin)			IBJ																
			Labor Journeyman																
			Straight Pay	8.00	8.00	8.00	8.00											Gross Wages	
			CIAP																Federal Inco
			Defined Cont																Federal FICA
			H & S Fund																Federal Medt
			Pension																NJ Department
			Welfare																NJ State Use
			IBECET																NJ Paid Leave
			SET Fund																NJ Disability
		Vacation																Dues	
																		LEROP	
																		PAC	
																		Total Deduct	
																		Net Pay	
																		Hrs This Ckr	

Job Totals for Jose Purificasio 8.00 8.00 8.00 8.00 24.00 858.00 32.50

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All Projects Worked			
				SU	MO	TU	WE	TH	FR	SA				To Union	This Project				
Gender: Male Race: White (Not of Hispanic Origin)			IBJ																
			Labor Journeyman																
			Straight Pay	8.00	8.00	8.00	8.00												Gross Wages
			CIAP																Federal Inco
			Defined Cont																Federal FICA
			H & S Fund																Federal Medt
			Pension																NJ Department
			Welfare																NJ State Use
			IBECET																NJ Paid Leave
			SET Fund																NJ Disability

Job Totals for Robert White 4 1,144.02 261.535

RSSCENTER
FADELEYTE

The Cantit Group
Certified Payroll Register

Conti Enterprises, Inc - EWR 154.183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor

Project and Location 1407600
EWR154.183 Aviation Fuel Sys
Newark NJ
Contract No: 69950373

Pay Period Ending Date 05/23/2015
GL Period Number 21
Payroll Number 11

Name and Address	State	Fed	Pay Type	Pay and Date									Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All projects Worked
				ST	MO	TU	WE	TH	FR	SA	To Union	Dues						
Robert White			17	18	19	20	21	22	23			32.00	1,144.02			40.00		
Totals for Job				41.50	50.00	48.00	57.00					196.50	7,386.23					

EROF
PAC
Total Deduct
Net Pay
Hrs This CLK

Statement of Compliance

Date 5/27/2015

I, **BRENDA DAVIS** PAYROLL MANAGER do hereby state:
(Name of signatory party) (Title)

That I pay or supervise the payment of the persons employed by **CONTI ENTERPRISES, INC.** on the EWR 154.183 Aviation Fuel System
(Contractor or subcontractor) (Building or work)

That during the payroll period commencing on the 17th day of May 2015 and ending the 23th day of May 2015, 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 **CONTI ENTERPRISES, INC.** from the full weekly wages earned by any person and that
(Contractor or Subcontractor)

No deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act. As amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c) and described below:

FED, FICA, SUI, SIT, UNION DUES, HEALTH INS., APPLICABLE GARNISHES

2. That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.
3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a state apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.
4. That:
- (a) **WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS.**

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

(b) **WHERE FRINGE BENEFITS ARE PAID IN CASH**

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

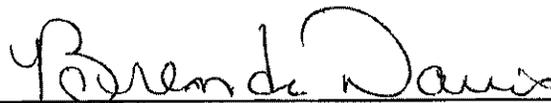
(c) **EXCEPTIONS**

EXCEPTION (CRAFT)	EXPLANATION

Remarks

BRENDA DAVIS/PAYROLL MANAGER

(Name and Title)



(Signature)

THE WILLFULL FALSIFICATION OF ANY OF THE ABOVE STATEMENT MAY SUBJECT TO THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SECTION 1001 OF TITLE 18 SECTIONS 231 OF TITLE 31 OF THE UNITED STATES CODE.

R5SCERTPR
FADBELEYE

The Conti Group
Certified Payroll Register

05/27/2015 8:11:16
Page- 3

Conti Enterprises, Inc - EWR 154.183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor
Project and Location 1407600
EWR154.183 Aviation Fuel Sys
Newark NJ

Contract No: 69950373

Pay Period Ending Date 05/23/2015
GL Period Number 21
Payroll Number 11

Name and Address	State	Fed	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All projects Worked	
				SU	MO	TU	WE	TH	FR	SA				To Union This Project	To Deduct This Project		
Gender: Male			Defined Cont	17	18	19	20	21	22	23							
Race: White (Not of Hispanic Origin)			H & S Fund														Federal Medi
			Pension														NI Departmen
			Welfare														NI State Un
			LECEI														NI Paid Leav
			SET Fund														NI Disabilit
			Vacation														Dues
																	I.E.R.O.F
																	PAC
																	Total Deduct
																	Net Pay
																	Hrs This Clk
Job Totals for Kevin Lamago				9.00	8.00	8.00	8.00	8.00			33.00		1,197.63				41.00

David Marconi	OEC	Operator Engineer C	Local: 825	NJ Operators	Payment Number:	261485
	Straight Pay		7.00	7.00	Gross Wages	1,798.62
	Overtime		50	50	Federal Inco	
	Annunty OT	Benefit			Federal ERCA	
	Annunty ST	Benefit			Federal Medi	
	Apprentice OT	Benefit			NI Departmen	
	Apprentice ST	Benefit			NI State Un	
	Pension OT	Benefit			NI Paid Leav	
	Pension ST	Benefit			NI Disabilit	
	SUB Fund OT	Benefit			Dues	
	SUB Fund ST	Benefit			PAC	
	Welfare OT	Benefit			Total Deduct	
	Welfare ST	Benefit			Net Pay	
	Lab MGMT OT	Benefit			Hrs This Clk	41.50
	Lab MGMT ST	Benefit				
	IAP OT	Benefit				
	IAP ST	Benefit				
	Savings OT	Benefit				
	Savings ST	Benefit				
Job Totals for David Marconi			7.50	7.50	329.92	

Serena M. Pettit	OEA	Operator Engineer A	Local: 825	NJ Operators	Payment Number:	261486
	Straight Pay		1.50	1.50	Gross Wages	2,015.61
	Annunty ST	Benefit			Federal Inco	
	Apprentice ST	Benefit			Federal ERCA	

Cont Enterprises, Inc - EWR 154.183 Contractor Project and Location 1407600
 2045 LINCOLN HIGHWAY Sub-Contractor EWR154.183 Aviation Fuel Sys
 EDISON NJ 08817 Newark NJ
 Contract No: 69950373

Pay Period Ending Date 05/23/2015
 GI Period Number 21
 Payroll Number 11

Name and Address	State	Fed	Pay	Day and Date							Total	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions For All projects Worked		
				ST	MO	TU	WE	TH	FR	SA				To Union	This Project			
Gender: Male Race: White (Not of Hispanic Origin)	Exempt	Exempt	Type															
Pension ST				17	18	19	20	21	22	23	Hours	This Project	This Project					
STUB Fund ST																		
Welfare ST																		
Lab M/GMT ST																		
IAP ST																		
Savings ST																		
Job Totals for Steven M. Pettiv													1.50	1.50	69.11			42.50

Payment Number: 126420
 Gross Wages 1,170.81
 Federal Inco
 Federal FICA
 Federal Medt
 NJ Departmen
 NJ State Use
 NJ Paid Leave
 NJ Disability
 Dues
 LEROF
 PAC
 Total Deduct
 Net Pay
 His This Ck

Name and Address	State	Fed	Pay	Day and Date							Total	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions For All projects Worked		
				ST	MO	TU	WE	TH	FR	SA				To Union	This Project			
Gender: Male Race: White (Not of Hispanic Origin)	Exempt	Exempt	Type															
IBJ																		
Straight Pay																		
CIAP																		
Defined Cont																		
H & S Fund																		
Pension																		
Welfare																		
LECET																		
SET Fund																		
Vacation																		
Job Totals for Jose Purificacio													8.00	8.00	858.00			32.50

Payment Number: 261535
 Gross Wages 1,430.02
 Federal Inco
 Federal FICA
 Federal Medt
 NJ Departmen
 NJ State Use
 NJ Paid Leave
 NJ Disability

Name and Address	State	Fed	Pay	Day and Date							Total	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions For All projects Worked		
				ST	MO	TU	WE	TH	FR	SA				To Union	This Project			
Gender: Male Race: White (Not of Hispanic Origin)	Exempt	Exempt	Type															
IBJ																		
Straight Pay																		
CIAP																		
Defined Cont																		
H & S Fund																		
Pension																		
Welfare																		
LECET																		
SET Fund																		
Job Totals for Robert White													8.00	8.00	858.00			32.50

Statement of Compliance

Date 6/3/2015

I, **BRENDA DAVIS** **PAYROLL MANAGER** do hereby state:
(Name of signatory party) (Title)

That I pay or supervise the payment of the persons employed by **CONTI ENTERPRISES, INC.** on the **EWR 154.183 Aviation Fuel System**
(Contractor or subcontractor) (Building or work)

That during the payroll period commencing on the 24th day of May 2015 and ending the 30th day of May 2015, 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 **CONTI ENTERPRISES, INC.** from the full weekly wages earned by any person and that
(Contractor or Subcontractor)

No deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act. As amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c) and described below:

FED, FICA, SUI, SIT, UNION DUES, HEALTH INS., APPLICABLE GARNISHES

2. That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.
3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a state apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

4. That:

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

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

(b) **WHERE FRINGE BENEFITS ARE PAID IN CASH**

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

(c) **EXCEPTIONS**

EXCEPTION (CRAFT)	EXPLANATION

Remarks

BRENDA DAVIS/PAYROLL MANAGER

(Name and Title)



(Signature)

THE WILLFULL FALSIFICATION OF ANY OF THE ABOVE STATEMENT MAY SUBJECT TO THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SECTION 1001 OF TITLE 18 SECTIONS 231 OF TITLE 31 OF THE UNITED STATES CODE.

R55C8TRR
FADBELEYE

The Cant Group
Certified Payroll Register

Cont Enterprises, Inc - EWR 154.133
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor
Project and Location 1407600
EWR154.133 Aviation Fuel Sys
Newark NJ
Contract No: 69950373

Pay Period Ending Date 05/30/2015
GL Period Number 22
Payroll Number 12

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid To Union This Project	Total Gross Pay & Deductions for All projects Worked
				SU	MO	TU	WE	TH	FR	SA					
Welfare				24	25	26	27	28	29	30					Child Support
LECT															Child Supp fee
SET Fund															Dues
Reverse 4085															LEROF
Vacation															PAC
Ann Allow															Total Deduct
															Net Pay
															Hrs This Ckr
															40.50

Job Totals for Timothy Houlihan

8.50 8.00 16.50 605.51 433.64

Scott J Jacobs

1	OE A	Operator Engineer A	Local	325	NI Operators	Payment Number		
	Straight Pay	8.00	8.00	8.00	8.00	40.00	1,842.80	261778
	Annvity ST	Benefit						Gross Wages
	Apprentice ST	Benefit						Federal Inco
	Pension ST	Benefit						Federal FICA
	SUB Fund ST	Benefit						Federal Medi
	Welfare ST	Benefit						NI Department
	Lab MGMT ST	Benefit						Dues
	IAP ST	Benefit						PAC
	Savings ST	Benefit						Total Deduct
								Net Pay
								Hrs This Ckr
								40.00

Job Totals for Scott J Jacobs

8.00 8.00 8.00 8.00 8.00 40.00 1,842.80

LAB	Labor Journeyman	Local	472	NI Laborers H & G	Payment Number	
	Straight Pay	8.00	8.00	16.00	572.00	261784
	CLAP	Benefit				Gross Wages
	Defined Cont	Benefit				Federal Inco
	H & S Fund	Benefit				Federal FICA
	Pension	Benefit				Federal Medi
	Welfare	Benefit				NI Department
	LECT	Benefit				NI State Unr
	SET Fund	Benefit				NI Paid Leav
	Vacation	Benefit				NI Disabilit
						Dues
						LEROF
						PAC
						Total Deduct
						Net Pay

Gender: Male
Race: White (Not of Hispanic Origin)

261784
1,430.00

R55CRRTR
FADHEL EYE

The Cant Group
Certified Payroll Register

Cont Enterprises, Inc - EWR 154.183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor
Project and Location 1407600
ENR154.183 Aviation Fuel Sys
Newark NJ
Contract No: 69950373

Pay Period Ending Date 05/30/2015
GL Period Number 22
Payroll Number 12

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid To Union This Project	Total Gross Pay & Deductions for All projects Worked Hrs This Clk
				ST	MO	TU	WE	TH	FR	SA					
Job Totals for Kevin Lamigo				24	25	26	27	28	29	30	16.00	572.00		40.00	

David Marconi	OEC	Operator Engineer C	Local: 825	NI Operators	Payment Number: 261799
Straight Pay	8.00			8.00	Gross Wages 1,926.35
Overtime	2.00		1.00	3.00	Federal Inco 191.58
Annulity OT		Benefit			Federal FICA
Annulity ST		Benefit			Federal Medi
Apprentice OT		Benefit			NI Department
Apprentice ST		Benefit			NI State Use
Pension OT		Benefit			NI Paid Lev
Pension ST		Benefit			NI Disabilit
STUB Fund OT		Benefit			Dues
STUB Fund ST		Benefit			PAC
Welfare OT		Benefit			Total Deduct
Welfare ST		Benefit			Net Pay
Lab MGMT OT		Benefit			Hrs This Clk 43.50
Lab MGMT ST		Benefit			
LAP OT		Benefit			
LAP ST		Benefit			
Savings OT		Benefit			
Savings ST		Benefit			
Job Totals for David Marconi			1.00	11.00	532.15

Jose Parizacano	LRJ	Labour Journeyman	Local: 472	NI Laborers H & G	Payment Number: 126543
Straight Pay	8.00			8.00	Gross Wages 1,144.00
CIAP		Benefit			Federal Inco
Defined Cont		Benefit			Federal FICA
H & S Fund		Benefit			Federal Medi
Pension		Benefit			NI Department
Welfare		Benefit			NI State Use
IHCET		Benefit			NI Paid Lev
SETP Fund		Benefit			NI Disabilit
Vacation		Benefit			Dues
					LEROF
					PAC
					Total Deduct
					Net Pay

Gender: Male
Race: White (Not of Hispanic Origin)

R55CERTR
EADLE EYE

The Const Group
Certified Payroll Register

Const Enterprises, Inc. - EWR 154.133
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor
Project and Location 1407600
EWR154.133 Aviation Fuel Sys
Newark NJ

Contract No: 69950373

Pay Period Ending Date 05/30/2015
GL Period Number 22
Payroll Number 12

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All projects Worked His This Ck	
				SU	MO	TU	WE	TH	FR	SA				To Union This Project			
Jose Purificacao												8.00	8.00	24.00	858.00		32.00

Robert White	4	IBJ	Labor Journeyman	Local: 472	NI Laborers H & G	Payment Number:	261847
		Straight Pay		8.00	8.00	Gross Wages	1,450.00
		CIAP	Benefit			Federal IICO	
		Defined Cont	Benefit			Federal FICA	
		H & S Fund	Benefit			Federal Mdelt	
		Pension	Benefit			NI Department	
		Waivare	Benefit			NI State Use	
		LECT	Benefit			NI Paid Leav	
		SET Fund	Benefit			NI Disab/lt	
		Vacation	Benefit			Dues	
						LEROF	
						PAC	
						Total Deduct	
						Net Pay	
						His This Ck	40.00

Job Totals for Robert White	4	IBJ	Labor Journeyman	Local: 472	NI Laborers H & G	Payment Number:	261847			
Totals for Job	1407600	EWR154.133 Aviation Fuel Sys		24.00	24.00	50.50	24.00	57.00	179.50	7,314.70

Statement of Compliance

Date 6/3/2015

I, **BRENDA DAVIS** **PAYROLL MANAGER** do hereby state:
 (Name of signatory party) (Title)

That I pay or supervise the payment of the persons employed by **CONTI ENTERPRISES, INC.** on the **EWR 154.183 Aviation Fuel System**
 (Contractor or subcontractor) (Building or work)

That during the payroll period commencing on the 24th day of May 2015 and ending the 30th day of May 2015, 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 **CONTI ENTERPRISES, INC.** from the full weekly wages earned by any person and that
 (Contractor or Subcontractor)

No deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act. As amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c) and described below:

FED, FICA, SUI, SIT, UNION DUES, HEALTH INS., APPLICABLE GARNISHES

2. That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.
3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a state apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

4. That:

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

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

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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

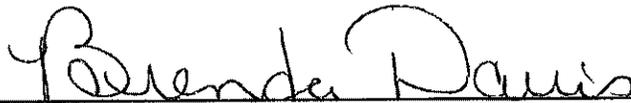
(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

Remarks

BRENDA DAVIS/PAYROLL MANAGER

(Name and Title)



(Signature)

THE WILLFULL FALSIFICATION OF ANY OF THE ABOVE STATEMENT MAY SUBJECT TO THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SECTION 1001 OF TITLE 18 SECTIONS 231 OF TITLE 31 OF THE UNITED STATES CODE.

RESERVED
FADDELEYE

The Cant Group
Certified Payroll Register

Conti Enterprises, Inc.- EWR 154.183
2095 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor _____
Project and Location 1407800
EWR154.183 Aviation Fuel Sys
Newark NJ
Contract No: 69950373

Pay Period Ending Date 05/30/2015
GL Period Number 22
Payroll Number 12

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All projects Worked
				ST	MO	TU	WE	TH	FR	SA				In Union	Payroll	

Gilberto Genda Gender: Male Race: White (Not of Hispanic Origin)	OEA		Operator Engineer A	24	25	26	27	28	29	30	32.00	1,474.24	1,474.24		126488		
				Straight Pay	8.00	8.00	8.00										
				Amnityr ST	Benefit												
				Apprentice ST	Benefit												
				Pension ST	Benefit												
				STUB Fund ST	Benefit												
				Welfare ST	Benefit												
				Lab MGMT ST	Benefit												
				IAP ST	Benefit												
				Savings ST	Benefit												
Job Totals for Gilberto Genda				8.00	8.00	8.00	8.00	8.00	8.00	32.00	1,474.24	1,474.24		40.00			

Antonio Gracia Gender: Male Race: White (Not of Hispanic Origin)	4	IEJ	Labor Journeyman	24	25	26	27	28	29	30	32.00	1,144.00	1,144.00		126492	
				Straight Pay	8.00	8.00	8.00									
				CIAP	Benefit											
				Defined Cont	Benefit											
				H & S Fund	Benefit											
				Pension	Benefit											
				Welfare	Benefit											
				LIBERT	Benefit											
				SEI Fund	Benefit											
				Vacation	Benefit											
Job Totals for Antonio Gracia				8.00	8.00	8.00	8.00	8.00	8.00	32.00	1,144.00	1,144.00		41.00		

Timothy Houlman Gender: Male Race: White (Not of Hispanic Origin)	4	LBS	Labor Steward	24	25	26	27	28	29	30	16.00	578.40	578.40		261775	
				Straight Pay	8.00	8.00										
				Overtime	50											
				CIAP	Benefit											
Job Totals for Timothy Houlman				8.00	8.00	8.00	8.00	8.00	8.00	32.00	1,144.00	1,144.00		41.00		

Payment Number:	261775
Gross Wages	1,473.11
Federal Inco	
Federal HICA	
Federal Medi	
NI Department	
Child Support	

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The Conti Group
Certified Payroll Register

06/03/2015 7:11:28
Page - 2

Conti Enterprises, Inc - EWR 154,183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor
Project and Location
EWR154,183 Aviation Fuel Sys
Newark NJ
Contract No: 69950373

Pay Period Ending Date 05/30/2015
GL Period Number 22
Payroll Number 12

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All Projects Worked			
				ST	MO	TU	WE	TH	FR	SA				To Union This Project	Net Pay				
Welfare				24	25	26	27	28	29	30									
	LECT																		
	SEI Fund																		
	Reverse 4085																		
	Vacation																		
Auto Allow																			
Job Totals for Timothy Houlihan													8.50	8.00	16.50	605.51			40.50

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All Projects Worked							
				ST	MO	TU	WE	TH	FR	SA				To Union This Project	Net Pay								
OEA																							
	Operator Engineer A																						
	Straight Pay			8.00	8.00	8.00	8.00	8.00	8.00														
	Annuit ST																						
	Apprentice ST																						
	Pension ST																						
	STUB Fund ST																						
	Welfare ST																						
	Lab MGMT ST																						
	IAP ST																						
Savings ST																							
Job Totals for Scott J Jacobs													8.00	8.00	8.00	8.00	8.00	8.00	40.00	1,842.80			40.00

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All Projects Worked							
				ST	MO	TU	WE	TH	FR	SA				To Union This Project	Net Pay								
LABJ																							
	Labor Journeyman																						
	Straight Pay			8.00	8.00	8.00	8.00	8.00	8.00														
	CIAP																						
	Defined Cont																						
	H & S Fund																						
	Pension																						
	Welfare																						
	LECT																						
	SEI Fund																						
Vacation																							
Job Totals for Kevin Lamago													8.00	8.00	8.00	8.00	8.00	8.00	40.00	1,842.80			40.00

Gender: Male
Race: White (Not of Hispanic Origin)

Payment Number: 261734
Gross Wages: 1,430.00
Federal Inco
Federal FICA
Federal Medi
NJ Department
NJ State Use
NJ Paid Leave
NJ Disability
Dues
LEROF
PAC
Total Deduct
Net Pay

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PADELEYE

The Conti Group
Certified Payroll Register

Conti Enterprises, Inc. EWR 154.183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor
Project and Location 1407600
EWR154.183 Aviation Fuel Sys
Newark NJ
Contract No: 69950373

Pay Period Ending Date 05/30/2015
GL Period Number 22
Payroll Number 12

Name and Address	State	Fed	Pay	Day and Date							Total	Rate	Gross Pay	Benefits Paid		Total Gross Pay & Deductions	
				SU	MO	TU	WE	TH	FR	SA				To Union	To Project		for All projects Worked
Job Totals for	Kevin Lammgo			24	25	26	27	28	29	30	Hours	Rate	This Project	This Project	Hrs This Clk	40.00	
David Marconi			OEC														
			Straight Pay				8.00						8.00				261.799
			Overtime				2.00						3.00				1,926.35
			Annulity OT														
			Annulity ST														
			Apprentice OT														
			Apprentice ST														
			Pension OT														
			Pension ST														
			SUB Fund OT														
			SUB Fund ST														
			Welfare OT														
			Welfare ST														
			Lab MGMT OT														
			Lab MGMT ST														
			IAP OT														
			IAP ST														
			Savings OT														
			Savings ST														
Job Totals for	David Marconi						10.00		1.00		11.00		532.15				43.50

Job Totals for	David Marconi	IRJ	Labor Journeyman	Local	472	NJ Laborers H & G	Payment Number:	126543
		Straight Pay		8.00	8.00	24.00	Gross Wages	1,144.00
		CIAP	Benefit				Federal Inco	
		Defined Cont	Benefit				Federal FICA	
		H & S Fund	Benefit				NJ Department	
		Pension	Benefit				NJ State Use	
		Welfare	Benefit				NJ Paid Leave	
		LECTET	Benefit				NJ Disability	
		SET Fund	Benefit				Dues	
		Vacation	Benefit				LEROF	
							PAC	
							Total Deduct	
							Net Pay	
							This This Clk	43.50

Gender: Male
Race: White (Not of Hispanic Origin)

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PADELEVE

The Const Group
Certified Payroll Register

Cont Enterprises, Inc.- EWR 154.183
2045 LINCOLN HIGHWAY
EDISON NJ 08817

Contractor X
Sub-Contractor
Project and Location 1407600
EWR154.183 Aviation Fuel Sys
Newark NJ
Contract No: 69950373

Pay Period Ending Date 05/30/2015
GL Period Number 22
Payroll Number 12

Name and Address	State	Fed Exempt	Pay Type	Day and Date							Total Hours	Rate	Gross Pay This Project	Benefits Paid		Total Gross Pay & Deductions for All projects Worked His This CLK		
				SU	MO	TU	WE	TH	FR	SA				To Union This Project	Total Gross Pay & Deductions for All projects Worked His This CLK			
Job Totals for Jose Purificacao												8.00	8.00	8.00	24.00	538.00		32.00

Robert White	4	LRJ	Labor Journeyman	Local 472	8.00	NJ Laborers H & G	286.00	Payment Number: 261847
			Straight Pay					Gross Wages 1,430.00
			CLAP					Federal Inco
			Defund Cont					Federal EICA
			H & S Fund					Federal Medt
			Pension					NJ Department
			Welfare					NJ State Use
			LECEI					NJ Paid Lev
			SETI Fund					NJ Disabthr
			Vacation					Dues
								LEROF
								PAC
								Total Deduct
								Net Pay
								His This CLK

Gender: Male
Race: White (Not of Hispanic Origin)

Job Totals for Robert White
Totals for Job 1407600 EWR154.183 Aviation Fuel Sys

24.00	24.00	50.50	24.00	57.00	179.50	7,314.70
-------	-------	-------	-------	-------	--------	----------

Net Pay 40.00

**NEW JERSEY DEPARTMENT OF TRANSPORTATION
STATEMENT OF COMPLIANCE**

Date: June 4, 2015

I, Carlos A. Medina, President do hereby state:
(Name of signatory party) (Title)

(1) That I pay or supervise the payment of the persons employed by Robinson Aerial Surveys, Inc. on
(Contractor of Subcontractor)
the Newark Liberty Int'l Airport ; that during the payroll period commencing on the 4th day of May 20 15 and
(Project Name)
ending the 10th day of May 20 15 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 Robinson Aerial Surveys, Inc.
(Contractor of Subcontractor)

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

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

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

(4) That:

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

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

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS

NAME AND TITLE Carlos A. Medina, President	SIGNATURE 
---	---

The willful falsification of any of the above statements may subject the contractor or subcontractor to civil or criminal prosecution. See Section 100 of Title 18 and Section 231 of the United States Code.

NEW JERSEY DEPARTMENT OF TRANSPORTATION STATEMENT OF COMPLIANCE

Date: June 4, 2015

I, Carlos A. Medina, President do hereby state:
(Name of signatory party) (Title)

(1) That I pay or supervise the payment of the persons employed by Robinson Aerial Surveys, Inc. on
(Contractor of Subcontractor)
 the Newark Liberty Int'l Airport; that during the payroll period commencing on the 11th day of May 20 15 and
(Project Name)
 ending the 17th day of May 20 15 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 Robinson Aerial Surveys, Inc.
(Contractor of Subcontractor)

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

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

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

(4) That:

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

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

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS

NAME AND TITLE Carlos A. Medina, President	SIGNATURE 
---	---

The willful falsification of any of the above statements may subject the contractor or subcontractor to civil or criminal prosecution. See Section 100 of Title 18 and Section 231 of the United States Code.

NEW JERSEY DEPARTMENT OF TRANSPORTATION STATEMENT OF COMPLIANCE

Date: June 4, 2015

I, Carlos A. Medina, President do hereby state:
(Name of signatory party) (Title)

(1) That I pay or supervise the payment of the persons employed by Robinson Aerial Surveys, Inc. on
(Contractor of Subcontractor)
 the Newark Liberty Int'l Airport ; that during the payroll period commencing on the 25th day of May 20 15 and
(Project Name)
 ending the 31st day of May 20 15 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 Robinson Aerial Surveys, Inc.
(Contractor of Subcontractor)
 from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages
 earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of
 Labor under the Copeland Act, as amended (48 Stat. 108, 72 Stat. 967; 76Stat 357; 40 U.S.C. §3145) and described below:

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

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

(4) That:

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

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

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS

NAME AND TITLE Carlos A. Medina, President	SIGNATURE 
---	---

The willful falsification of any of the above statements may subject the contractor or subcontractor to civil or criminal prosecution. See Section 100 of Title 18 and Section 231 of the United States Code.

Statement of Compliance

I do hereby state:

1. That I, Lou Pacheco, Treasurer, during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Ferreira Construction Company Inc (Name of Contractor), and that 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 Ferreira Construction Company Inc (name of contractor) from the full weekly wages earned by any person, other than permissible deductions, including, but not limited to: Federal Withholding, FICA, Medicare, State Withholding, State Disability Insurance, Union Deductions, Child Support or other Garnishments.

2. That any payrolls rates contained in any wage

3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program.

4. That 2 WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS In addition to grams for the benefit of such in the contract, of such employees, except as noted in Section 4(c) below.

b. WHERE FRINGE BENEFITS ARE PAID IN CASH Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed except as noted in Section 4(c) below.

c. EXCEPTIONS:

EXCEPTION (GRAFD)

EXPLANATION

General Contractor: **Remedian Construction Company Inc** 31 Hanway Road Branchburg, NJ 08876 908-524-8655
 Sub-Contractor: **Remedian Construction Company Inc**
 Contract Number: **EM 154,133** Job Code: **Track Building** Date: **05-10-15** Project Name & Location: **CONVENTER AIRPORT ANDLER FUEL**
 Registration Number: **8486** ZEO: **220** 05-10-15 3 Zimmerman Road **NEWARK, NJ**

Erin McCarthy

Jose M. Acetia

Salto Flores

Scott Palfen

Ramon Ramos

Rate	05-04	05-05	05-06	05-07	05-08	05-09	05-10	Total	Base	Total	Benefit	Rate Per Hour	Hours	Local	Total	Gross Pay	Total Tax & Other Deductions	Net Pay	Accrual	Other Pay
Male	05-04	05-05	05-06	05-07	05-08	05-09	05-10													
OPERATORS & Crane Men	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	40.00	40.00	1.472	472	472	472	1,568.00	1,568.00				
OPERATORS	07			2.00	2.00			4.00												
LABORER & Crane Men	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	40.00	40.00	1.472	472	472	472	1,568.00	1,568.00				
OPERATORS & Support Men	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	40.00	40.00	1.472	472	472	472	1,568.00	1,568.00				
LABORER & Crane Men	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	40.00	40.00	1.472	472	472	472	1,568.00	1,568.00				
LABORER & Support Men	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	40.00	40.00	1.472	472	472	472	1,568.00	1,568.00				

This certified payroll has been prepared in accordance with the requirements of this STATEMENT OF THIS STATEMENT IS A PUBLIC RECORD. I certify that the above information represents wages and supplemental benefits paid to all persons employed by my firm for construction work on the above project during the period shown. I understand that falsification of this statement is a punishable offense.

Signature:  Name (Printed): **Lou Padresco** Title: **Treasurer** Date: **05-16-15**

JAMES M. ANSELLO
 PRESIDENT
 REMEDIAN CONSTRUCTION COMPANY INC
 NEWARK, NJ 07102
 DEC. 3, 2019

Statement of Compliance

I do hereby state:

1. That I, Lou Pacleco, Treasurer, during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Ferreira Construction Company Inc (Name of Contractor), and that 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 Ferreira Construction Company Inc (name of contractor) from the full weekly wages earned by any person, other than permissible deductions, including, but not limited to: Federal Withholding, FICA, Medicare, State Withholding, State Disability Insurance, Union Deductions, Child Support or other Garnishments.

2. That any payrolls rates contained in any wage

3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program.

4. That **2** WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS in addition to grants for the benefit of such in the contract, of such employees, except as noted in Section 4(c) below.

b. WHERE FRINGE BENEFITS ARE PAID IN CASH
Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed except as noted in Section 4(c) below.

c. EXCEPTIONS:

EXCEPTION (GRAFD)

EXPLANATION

General Contractor: Perfection Construction Company Inc 31 February Road Bensenville, NJ 08876 908-514-8655
 Sub-Contractor: 08876
 Contract Number: 2BR 154.183 Job Code: Week Ending Date: Project Name & Location: County-299 Airport Aviaton Road
 Registration Number: 58008 05-17-15 3 Rivercenter Road 3 Rivercenter Road Kew-Forest, NJ

Andrew M. Riolo

Zoea M. Amaliax

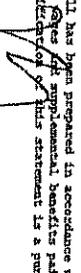
Julie Flores

Ramon Passas

Male	05-11	05-12	05-13	05-14	05-15	05-16	05-17	Total	Base	Total	Benefit	Rate	Per	Hour	Local	Total	Gross	Total	Net	Taxable	All
OPERATIONS	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Hours	Rate	Base	Rate	Per	Hour	Local	Total	Gross	Total	Net	Taxable	All	
OPERATIONS								1.501		1.501				1825		2,200.331					
LABORER								40.001		40.001				472		1,654.151					
OPERATIONS								1.501		1.501				825		1,986.711					
LABORER								40.001		40.001				472		1,654.151					

This certified payroll has been prepared in accordance with the instructions contained on the reverse side of this form. I certify that the above information represents the actual supplemental benefits paid to all persons employed by my firm for construction work on the above project during the period shown. I understand that falsification of this statement is a punishable offense.

ELABORATION OF THIS STATEMENT IS A FURTHER OFFENSE.

Signature:  Name (Printed): Lou Pacheco Title: Treasurer Date: 05-22-15

LINDA KISSELL
 NOTARY PUBLIC
 STATE OF NEW JERSEY
 MY COMMISSION EXPIRES DEC. 3, 2019

General Contractor: Ferracina Construction Company Inc
 Sub-Contractor: 31 Tannery Road Branaburg, KY 08976
 Contract Number: E20 154,183
 Registration Number: Essex
 Job Code: 220
 Week Ending Date: 05-17-15
 Project Name & Location: CONCRETE-200R Airport Aviation Fuel
 3 Newmarket Road
 908-634-8555
 Page 2

TERRY SWAN

	05-11	05-12	05-13	05-14	05-15	05-16	05-17	Total	Base	Total	Benefit	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Down	All Other Pay	
	Mon	Tue	Wed	Thu	Fri	Sat	Sun				Hour	Local	Benefit		Deductions				
238096K Male																			
238096K Black Man	8.00	8.00	8.00	8.00	8.00			40.00				1.472		1,554.15					
238096K								1.501				1.472							

Total for CONCRETE-200R Airport Aviation Fuel

Date	Day	05-11-15	05-12-15	05-13-15	05-14-15	05-15-15	05-16-15	05-17-15	Total	Base Pay	Benefits	Gross Pay	Deductions	Net Pay
Monday														
Tuesday														
Wednesday														
Thursday														
Friday														
Saturday														
Sunday														
		32.00	32.00	32.00	36.00	36.00		.00	168.00		9,151.35			

This certified payroll has been prepared in accordance with the instructions contained on the reverse side of this form. I certify that the above information represents the actual wages and benefits paid to all persons employed by my firm for construction work on the above project during the period shown. I understand that falsification of this statement is a punishable offense.

Signature:  Name (Print): Linda Kissell Title: Notary Public Date: 05-22-15

LINDA KISSELL
 NOTARY PUBLIC
 STATE OF NEW JERSEY
 MY COMMISSION EXPIRES DEC. 3, 2019

Statement of Compliance

I do hereby state:

1. That I, Lou Pacheco, Treasurer, during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Ferreira Construction Company Inc (Name of Contractor), and that 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 Ferreira Construction Company Inc (name of contractor) from the full weekly wages earned by any person, other than permissible deductions, including, but not limited to: Federal Withholding, FICA, Medicare, State Withholding, State Disability Insurance, Union Deductions, Child Support or Other Garnishments.

2. That any payrolls rates contained in any wage

3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program.

4. That ⁴ WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS
In addition to

grams for the benefit of such in the contract, of such employees, except as noted in Section 4(c) below.

b. WHERE FRINGE BENEFITS ARE PAID IN CASH

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

c. EXCEPTIONS:

EXCEPTION (GRAFT)

EXPLANATION

General Contractor: **Retrelex Construction Company Inc** 31 Tannery Road Hamdenbury, NJ 08016 908-534-8635
 SDC-Contractor: **Retrelex Construction Company Inc** 31 Tannery Road Hamdenbury, NJ 08016 908-534-8635
 Contract Number: **200 154,133** Job Code: **Week Backlog Date** Project Name & Location
 Registration Number: **None** 220 05-24-15 CONF-SM Airport Aviators Blvd
 3 Bremer Road
 REMARK: NJ

Brian McCarney

Male	05-18 05-19 05-20 05-21 05-22 05-23 05-24							Total	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay
	Mon	Tue	Wed	Thu	Fri	Sat	Sun										
OPERATIONS			2.50					2.50	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay
OT								2.50	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay

Male	05-18 05-19 05-20 05-21 05-22 05-23 05-24							Total	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay
	Mon	Tue	Wed	Thu	Fri	Sat	Sun										
LABORER								1.00	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay
OT								1.00	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay

Male	05-18 05-19 05-20 05-21 05-22 05-23 05-24							Total	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay
	Mon	Tue	Wed	Thu	Fri	Sat	Sun										
OPERATIONS								8.00	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay
OT								8.00	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay

Male	05-18 05-19 05-20 05-21 05-22 05-23 05-24							Total	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay
	Mon	Tue	Wed	Thu	Fri	Sat	Sun										
LABORER								8.00	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay
OT								8.00	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay

Male	05-18 05-19 05-20 05-21 05-22 05-23 05-24							Total	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay
	Mon	Tue	Wed	Thu	Fri	Sat	Sun										
LABORER								8.00	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay
OT								8.00	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay

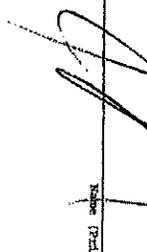
Male	05-18 05-19 05-20 05-21 05-22 05-23 05-24							Total	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay
	Mon	Tue	Wed	Thu	Fri	Sat	Sun										
LABORER								8.00	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay
OT								8.00	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay

Male	05-18 05-19 05-20 05-21 05-22 05-23 05-24							Total	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay
	Mon	Tue	Wed	Thu	Fri	Sat	Sun										
LABORER								8.00	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay
OT								8.00	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay

Male	05-18 05-19 05-20 05-21 05-22 05-23 05-24							Total	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay
	Mon	Tue	Wed	Thu	Fri	Sat	Sun										
LABORER								8.00	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay
OT								8.00	Rate	Per	Paid to	Total	Gross Pay	Total Tax &	Net Pay	Vacation/Dues	All Other Pay

This certified payroll has been prepared in accordance with the instructions contained on the reverse side of this form. I certify that the above information represents true and correct data. I understand that falsification of this statement is a punishable offense.

PARTICIPATION OF THIS EMPLOYEE IS A VOLUNTARY OFFER.

Signature:  Name (Print): **Linda Kissell** Title: **Treasurer** Date: **05-29-15**

LINDA KISSELL
 NOTARY PUBLIC
 STATE OF NEW JERSEY
 MY COMMISSION EXPIRES DEC. 3, 2019

General Contractor: Repetita Construction Company Inc
 31 Ramsey Road Bannockburn, NY 08876
 908-534-8655
 Contract Number: 208 154.183
 Job Code: 220
 Project Name & Location: CONN-SMR Airport Aviaam Pval
 Registration Number: 20808
 05-24-15
 3 Bannockburn Road
 Kowalski, NY

TERRY SWAIN

LABORER	Rate	05-18	05-19	05-20	05-21	05-22	05-23	05-24	Total	Base	Total	Benefit	Rate	Paid to	Total	Gross Pay	Total Tax &	Other	Net Pay	Other	Net Pay	Other	Net Pay
LABORER	8.00	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	8.00	8.00	8.00	8.00	8.00	8.00	8.00	8.00	8.00	8.00	8.00	8.00	8.00	8.00
LABORER	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
TOTAL																							

TOTAL FOR CONN-SMR AIRPORT AVIAAM PVAL

Date	Day	Hours	Rate	Total	Base Pay	Benefits	Gross Pay	Deductions	Net Pay
05-18-15	Monday	8.00	8.00	8.00	8.00		8.00		8.00
05-19-15	Tuesday	8.00	8.00	8.00	8.00		8.00		8.00
05-20-15	Wednesday	8.00	8.00	8.00	8.00		8.00		8.00
05-21-15	Thursday	8.00	8.00	8.00	8.00		8.00		8.00
05-22-15	Friday	8.00	8.00	8.00	8.00		8.00		8.00
05-23-15	Saturday	1.00	1.00	1.00	1.00		1.00		1.00
05-24-15	Sunday	0.00	0.00	0.00	0.00		0.00		0.00
TOTAL									

THIS CERTIFIED PAYROLL HAS BEEN PREPARED IN ACCORDANCE WITH THE LABORERS CONTRACT IS A FURNISHING ORDER.
 INFORMATION REPRESENTS WAGES AND STATUTORY BENEFITS PAID TO ALL PERSONS EMPLOYED BY MY FIRM FOR CONSTRUCTION WORK ON THE ABOVE PROJECT DURING THE PERIOD ABOVE.
 I UNDERSTAND THAT FALSIFICATION OF THIS STATEMENT IS A PUNISHABLE OFFENSE.

Signature: Lawrence Trevisser Name (Print): Lawrence Trevisser Title: Treasurer Date: 05-29-15

LINDA KISSELL
 NOTARY PUBLIC
 STATE OF NEW JERSEY
 MY COMMISSION EXPIRES DEC. 3, 2015

Statement of Compliance

I do hereby state:

1. That I, Lou Pacheco, Treasurer, during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Forrester Construction Company Inc. (Name of Contractor), and that 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 Forrester Construction Company Inc. (name of contractor) from the full weekly wages earned by any person, other than permissible deductions, including, but not limited to: Federal Withholding, FICA, Medicare, State Withholding, State Disability Insurance, Union Deductions, Child Support or Other Attachments.

2. That any payroll rates contained in any wage

3. That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program.

4. That:

a. WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS
In addition to programs for the benefit of such in the contract, of such employees, except as noted in Section 4(e) below.

b. WHERE FRINGE BENEFITS ARE PAID IN CASH
Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed except as noted in Section 4(e) below.

c. EXCEPTIONS:

EXCEPTION(CBA#):

EXPLANATION

EXCEPTION(CBA#):	EXPLANATION

TRUST STATE

DATE	AMOUNT	DESCRIPTION	ACCOUNT	STATUS	REMARKS
12/31/18	100.00	TRUST FUND	100-00	OPEN	INITIAL DEPOSIT
01/15/19	50.00	TRUST FUND	100-00	OPEN	ADDITIONAL DEPOSIT
03/01/19	25.00	TRUST FUND	100-00	OPEN	ADDITIONAL DEPOSIT
06/15/19	10.00	TRUST FUND	100-00	OPEN	ADDITIONAL DEPOSIT
09/01/19	5.00	TRUST FUND	100-00	OPEN	ADDITIONAL DEPOSIT
12/31/19	190.00	TRUST FUND	100-00	OPEN	TOTAL BALANCE

TRUST FOR CHILD BENEFIT TRUST FUND

DATE	AMOUNT	DESCRIPTION	ACCOUNT	STATUS	REMARKS
01/15/19	100.00	TRUST FUND	100-00	OPEN	INITIAL DEPOSIT
03/01/19	50.00	TRUST FUND	100-00	OPEN	ADDITIONAL DEPOSIT
06/15/19	25.00	TRUST FUND	100-00	OPEN	ADDITIONAL DEPOSIT
09/01/19	10.00	TRUST FUND	100-00	OPEN	ADDITIONAL DEPOSIT
12/31/19	190.00	TRUST FUND	100-00	OPEN	TOTAL BALANCE

This statement has been prepared by computer with the instructions contained in the system code at this time. I certify that the amount reported is correct and supplemental benefits paid to all persons employed by me for construction work on the above project during the period shown. I understand that I am liable for this statement if a mistake is shown.

[Signature]
 Lou Pacheco
 Treasurer

LINDA KISSELL
 NOTARY PUBLIC
 STATE OF NEW JERSEY
 MY COMMISSION EXPIRES DEC. 3, 2019

[Signature]
 12/31/19

