

Olivencia, Mildred

From: efraass@ualocal475.org
Sent: Friday, July 24, 2015 12:27 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. Bethel 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: No

List of specific record(s):

Certified Payroll Project EWR-154.183 Conti Enterprises for Weeks Ending Sat.66 Sat.613 Sat.620 Sat.627
Sat.74 Sat.711 Sat.718 and Sat.725

THE PORT AUTHORITY OF NY & NJ

FOI Administrator

August 5, 2015

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

Re: Freedom of Information Reference No. 16183

Dear Mr. Fraass:

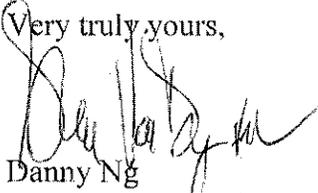
This is in response to your July 24, 2015 request, which has been processed under the Port Authority's Freedom of Information Code (the "Code", copy enclosed) for a copy of the certified Payroll related to Project No. EWR-154.183 Conti Enterprises for weeks ending Saturday, June 6, Saturday, June 13, Saturday, June 20, Saturday, June 27, Saturday, July 4, Saturday, July 11, Saturday, July 18, and Saturday, July 25.

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/16183-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*

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

EUR-154.183
As submitted
W/ATF #6

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor or Subcontractor **Ferreira Construction Co** Address **31 Tannery Rd, Branchburg, NJ 08876** EIN # _____
 Payroll No. **10** For Week Ending **6/7/15** Project & Location: **EWRL54.183 Aviation Fuel System Modifications, Newark, NJ** PA Contract Number: **69950373**

1 Employee Name, Address, and SS. No. (last 4 digit)	2 Use Trade & Circle Work Classification (Journeyman or Apprentice / Class 1,2,3)	3 SWAC or TWIC ID # if issued	4 Time	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 Withholding Tax	16 Other	17 Total Deductions	18 Net
				Mon	Tue	Wed	Thu	Fri	Sat	Sun				Hourly Rate	Paid to (local if Union is circled)	Total Paid							
				6/1	6/2	6/3	6/4	6/5	6/6	6/7													
Greg Maroszek	J Teamster A _____ Class 1, 2 or 3	1813-1K8DUJ	RT					4		4	\$34.85	\$139.40	\$23.83	U 4 0 8	\$95.31	\$2,152.02	\$164.64	\$354.73	\$10.60	\$529.97	\$1,622.05		
			OT				1			1	\$2.28	\$2.28	\$2.22	E	\$28.22								
			ST											O									
Jose M. Aquiles	J_Laborer J A _____ Class 1, 2 or 3	TIOB	RT	2	8	8	8	8		34	\$36.45	\$1,239.30	\$25.00	U 4 7 2	\$849.75	\$1,418.94	\$108.54	\$176.25	\$151.96	\$436.75	\$982.19		
			OT			1.5				1.5	\$54.68	\$82.01	\$25.00	E	\$37.50								
			ST											O									
Julio Flores	J_OPERATOR A _____ Class 1, 2 or 3	TIOB	RT	8	8	8	8	8		40	\$46.07	\$1,842.80	\$30.33	U 8 2 5	\$1,213.16	\$1,892.80	\$144.04	\$424.78	\$117.20	\$687.70	\$1,195.10		
			OT											E									
			ST											O									
Manuel Matos	J_Laborer J A _____ Class 1, 2 or 3	TIOB	RT					8		8	\$35.75	\$286.00	\$24.96	U 4 7 2	\$199.71	\$1,327.22	\$101.54	\$289.19	\$153.71	\$545.63	\$781.59		
			OT											E									
			ST											O									
Frankie Mencham	J_laborer J A _____ Class 1, 2 or 3	TIOB	RT	2	8	8	8	8		34	\$36.45	\$1,239.30	\$25.00	U 4 7 2	\$849.76	\$1,418.94	\$108.55	\$317.71	\$161.54	\$589.08	\$829.86		
			OT			1.5				1.5	\$54.68	\$2.01	\$25.00	E	\$37.50								
			ST											O									

Key:
 RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

NOTE:
 1. All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
 2. Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
 3. Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

I, Lou Pacheco certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Lou Pacheco
 Print Name Officer/Designee


 Signature

7/6/2015
 Date

Sworn to before me, this day
6 of July, 2015


 Signature of Notary Public

LINDA KISSELL
 NOTARY PUBLIC
 STATE OF NEW JERSEY
 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:

a. 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 (CRAFT)

EXPLANATION

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EXCEPTION (CRAFT)

EXPLANATION

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor or Subcontractor **Ferreira Construction Co** Address **31 Tannery Rd, Banchburg, NJ 08876** EIN #

Payroll No. **11** For Week Ending **6/14/15** Project & Location: **EW/R154.183 Aviation Fuel System Modifications, Newark, NJ** PA Contract Number: **69950373**

1	2	3	4	5							6	7	8	9	10		12	13	14	15	16	17	18
				Day and Date											Supplemental Benefits								
				Mon	Tue	Wed	Thu	Fri	Sat	Sun					Total Hrs	Base Hourly Rate of Pay							
Frankie Mencham	J Laborer A Class 1, 2 or 3	TIDB		8	8	8	8	8		40	\$36.45	\$1,458.00	\$24.99	U 4 7 2	\$999.71			\$122.15	\$374.39	\$183.59	\$681.57	\$915.15	
Scott Peiffer	J Laborer - Foreman A Class 1, 2 or 3	1514-UEBIMW		8	8	8	8	8		40	\$39.00	\$1,560.00	\$25.10	U 4 7 2	\$1,003.82			\$156.21	\$352.85	\$185.06	\$694.12	\$1,347.78	
Ramon Ramos	J Laborer A Class 1, 2 or 3	TIDB		8	8	8	8	8		40	\$36.45	\$1,458.00	\$24.99	U 4 7 2	\$999.71			\$119.95	\$123.42	\$181.03	\$473.95	\$1,094.05	
Luis Rivera	J Laborer A Class 1, 2 or 3	TIDB		8	8	8	8	8		40	\$36.45	\$1,458.00	\$24.99	U 4 7 2	\$899.72			\$122.14	\$333.23	\$323.59	\$780.40	\$816.32	
David Schickling	J OPERATOR A Class 1, 2 or 3	TIDB		8	8	8	8	8		40	\$46.07	\$1,842.80	\$30.33	U 8 2 5	\$1,213.16			\$146.74	\$458.21	\$119.41	\$726.09	\$1,192.01	

Key:
 RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

NOTE:
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Lou Pacheco
 Print Name Officer/Designee

[Signature]
 Signature

7/6/2015
 Date

Sworn to before me, this day
10 of July, 2015

[Signature]
 LINDA KISSELL
 NOTARY PUBLIC
 STATE OF NEW JERSEY
 Signature Commission Expires DEC. 3, 201

Statement of Compliance

I do hereby state:

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c. EXCEPTIONS:

EXCEPTION (CRAFT)

EXPLANATION

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EXPLANATION

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor or Subcontractor Ferrreira Construction Co Address 31 Tannery Rd, Banchburg, NJ 08876 EIN #
 Payroll No. 12 For Week Ending 6/21/15 Project & Location: EWR154.183 Aviation Fuel System Modifications, Newark, NJ PA Contract Number: 69950373

1 Employee Name, Address, and SS. No. (last 4 digits)	2 Unit Trade & Grade Work Classification (Journeyman or Apprentice / Class 1,2,3)	3 SWAC or DWIC ID # if issued	4 Day and Date	5 Total Hrs	6 Base Hourly Rate of Pay	7 Total Base Pay	8 Hourly Rate	9 Supplemental Benefits			12 Gross Amt. Earned	13 Taxable Gross Wages	14 FICA	15 With- holding Tax	16 Other	17 Total Deductions	18 Net			
								9a Paid to (local # if Union is closed)	9b Total Paid	9c Total Paid										
								Mon	Tue	Wed								Thu	Fri	Sat
Greg Maroszek	J Teamster A _____ Class 1, 2 or 3	1813-IKBDUJ	6/15	4.5																
			6/16																	
			6/17																	
			6/18																	
			6/19																	
			6/20																	
			6/21																	
Jose M. Aquiles	J_Laborer J A _____ Class 1, 2 or 3	TIDB	6/15	8	8															
			6/16																	
			6/17																	
			6/18																	
			6/19																	
			6/20																	
			6/21																	
Julio Flores	J_OPERATOR A _____ Class 1, 2 or 3	TIDB	6/15	8	8	8	8	8												
			6/16																	
			6/17																	
			6/18																	
			6/19					0.5												
			6/20																	
			6/21																	
Frankie Mencham	J_Laborer J A _____ Class 1, 2 or 3	TIDB	6/15	8	8	8	8	8												
			6/16																	
			6/17																	
			6/18																	
			6/19					0.5												
			6/20																	
			6/21																	
Scott Pellfer	J_Laborer - Foreman A _____ Class 1, 2 or 3	1514-UEBIMW	6/15	8	8	8	8	8												
			6/16																	
			6/17																	
			6/18																	
			6/19	0.5	0.5	0.5	0.5	1												
			6/20																	
			6/21																	

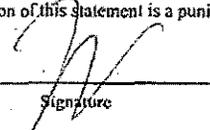
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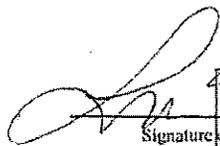
Sworn to before me, this day
 6 of July, 2015

NOTE:
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 3. Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

Lou Pacheco
 Print Name Object/Designer


 Signature

7/6/2015
 Date


 Signature of Notary Public

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

Statement of Compliance

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c. EXCEPTIONS:

EXCEPTION (CRAFT)

EXPLANATION

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

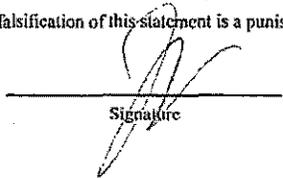
Name of Contractor or Subcontractor Ferrelra Construction Co Address 31 Tannery Rd, Banchburg, NJ 08876 EIN #
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1 Employee Name, Address, and SS. No. (last 4 digits)	2 List Trade & Grade Work Classification (Journeyman or Apprentice / Class 1,2,3)	3 SWAC or TWIC ID # if issued	4 Y I M C	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Hourly Rate	10 Supplemental Benefits		12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding Tax	16 Other	17 Total Deductions	18 Net
				Mon	Tue	Wed	Thu	Fri	Sat	Sun					Paid to (for of # if Union is included)	Total Paid							
				8/15	6/16	6/17	6/18	6/19	6/20	6/21													
Ramon Ramos	J Laborer A _____ Class 1, 2 or 3	TIDB	R	8	8	8	8	8		40	\$36.45	\$1,458.00	\$25.00	U 4 7 2	\$999.72	\$1,596.72	\$122.16	\$127.73	\$183.59	\$483.94	\$1,112.78		
			O				0.5			0.5	\$54.68	\$27.34	\$25.02	E	\$12.51								
			T												O								
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			O				0.5			0.5	\$54.68	\$27.34	\$25.02	E	\$12.51								
			T												O								
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			O				0.5			0.5	\$69.11	\$34.55	\$44.58	E	\$22.29								
			T												O								
Terry Swain	J Laborer A _____ Class 1, 2 or 3	TIDB	R	8	8	8	8	8		40	\$35.75	\$1,430.00	\$24.97	U 4 7 2	\$998.60	\$1,568.19	\$119.95	\$204.45	\$179.66	\$805.66	\$1,063.13		
			O				0.5			0.5	\$53.63	\$26.81	\$25.00	E	\$12.50								
			T												O								
.	J -												U										

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 Print Name / Officer/Designee


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7/6/2015
 Date

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 Signature of Notary Public
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EXPLANATION

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor <input type="checkbox"/> or Subcontractor <input checked="" type="checkbox"/> Ferreira Construction Co		Address 31 Tannery Rd, Banchburg, NJ 08876										EIN #											
Payroll No. 13		For Week Ending 6/28/15			Project & Location: EWR154.183 Aviation Fuel System Modifications, Newark, NJ										PA Contract Number: 69950373								
Employee Name, Address, and SS. No. (last 4 digits)	Job Title & Circle Work Classification (Journeyman or Apprentice / Class 1,2,3)	SWAC or TWICID # If Issued	Day and Date							Total Hrs	Base Hourly Rate of Pay	Total Base Pay	Hourly Rate	Supplemental Benefits		Gross Amt Earned	Taxable Gross Wages	FICA	Withholding Tax	Other	Total Deductions	Net	
			Mon	Tue	Wed	Thu	Fri	Sat	Sun					Paid to (Local # If Union is checked)	Total Paid								
			6/22	6/23	6/24	6/25	6/26	6/27	6/28														
Julio Flores	J_OPERATOR A	TIOB	8	8	8	8	8		40	\$46.07	\$1,842.80	\$30.33	U 8 2 5	\$1,213.15									
			2	1.5		1	0.5		5	\$69.11	\$645.53	\$44.57		\$222.88	\$2,235.83			\$171.04	\$546.53	\$139.18	\$858.76	\$1,377.07	
Frankie Mencham	J_Laborer J A	TIOB	8	8	8	8	8		40	\$36.45	\$1,458.00	\$24.99	U 4 7 2	\$999.70									
			2	1.5		1	0.5		5	\$54.68	273.38	\$25.00		\$124.99	\$1,855.14			\$141.92	\$459.05	\$206.56	\$809.20	\$1,045.94	
Scott Peiffer	J_Laborer - Foreman A	1514-UEBIMW	8	8					16	\$39.00	\$624.00	\$25.10	U 4 7 2	\$401.52									
			2.5	2.5					4.5	\$58.50	263.25	\$25.11		\$112.96	\$1,057.38			\$80.89	\$123.90	\$90.86	\$295.65	\$761.23	
Ramon Ramos	J_Laborer A	TIOB	8	8	8	8	8		40	\$36.45	\$1,458.00	\$24.99	U 4 7 2	\$999.70									
			1	1.5		1	0.5		4	\$54.68	\$218.71	\$24.99		\$99.99	\$1,797.72			\$137.52	\$157.08	\$192.39	\$543.38	\$1,254.34	
Luis Rivera	J_Laborer A	TIOB	8	8	8	8	8		40	\$36.45	\$1,458.00	\$24.99	U 4 7 2	\$999.70									
			1	1.5		1	0.5		4	\$54.68	\$218.71	\$24.99		\$99.99	\$1,797.72			\$137.53	\$397.55	\$341.46	\$878.16	\$919.56	

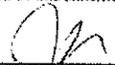
Key:
 RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

I, Lou Pacheco certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Sworn to before me, this day 10 of July 2015

NOTE:
 1. All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
 2. Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
 3. Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

Lou Pacheco
 Print Name Officer/Designee


 Signature

7/10/2015
 Date


 Signature of Notary Public

Statement of Compliance

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

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:

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(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 (CRAFT)

EXPLANATION

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor or Subcontractor Ferreira Construction Co Address 31 Tannery Rd, Banchburg, NJ 08876 EIN #

Payroll No. 13 For Week Ending 6/28/15 Project & Location: EWR154.183 Aviation Fuel System Modifications, Newark, NJ PA Contract Number: 69950373

1	2	3	4	5							6	7	8	9	10		12	13	14	15	16	17	18
				Day and Date											Supplemental Benefits								
				Mon	Tue	Wed	Thu	Fri	Sat	Sun					Total Hrs	Base Hourly Rate of Pay							
David Schickling	J_OPERATOR	TIDD	7	8	8	8	8	8		40	\$46.07	\$1,842.80	\$30.33	U B 2 5	\$1,213.16	\$2,165.23	\$165.63	\$544.70	\$134.79	\$847.07	\$1,318.16		
	A		8	1.5		1	0.5		4	\$69.11	\$276.43	\$44.59	E	\$178.33									
	Class 1, 2 or 3																						
Terry Swain	J Laborer	TIOB	7	8	8	8	8	8		40	\$36.45	\$1,458.00	\$24.59	U 4 7 2	\$999.70	\$1,841.27	\$148.51	\$301.15	\$201.11	\$650.77	\$1,290.50		
	A		8	2		2	0.5		6.5	\$54.68	\$355.99	\$25.00	E	\$162.48									
	Class 1, 2 or 3																						
.	J												U										
.	A												E										
.	Class 1, 2 or 3												O										
.	J													U									
.	A													E									
.	Class 1, 2 or 3													O									

Key:
RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
U - Union E - Employee O - Other
J - Journeyman A - Apprentice H - Helper

NOTE:
1. All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
2. Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
3. Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

I, Lou Pacheco, certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Lou Pacheco
Print Name Officer/Designee

Signature

7/10/2015
Date

Sworn to before me, this day
10 of July 2015

Signature of Notary Public

Statement of Compliance

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

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
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(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 (CRAFT)

EXPLANATION

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor or Subcontractor
BARNER Electric Co Address 181 Avenue A Bayonne EIN # _____
 Payroll No. _____ For Week Ending 6/7/15 Project & Location: EWK PA Contract Number: EWK 154,183

1 Employee Name, Address, and SS. No. (last 4 digits)	2 List Trade & Circle Work Classification (Journeyman or Apprentice / Class 1,2,3)	3 SWAC or TWIC ID # If Issued	4 Day and Date							6 Total Hrs	7 Basic Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits		12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 Withholding Tax	16 Other	17 Total Deductions	18 Net	
			Mon	Tue	Wed	Thu	Fri	Sat	Sun				Hourly Rate	Paid to (Local # if Union is circled)								Total Paid
			T	M	W	T	F	S	S													
Brooks, Daniel	U							8	8	57.96	463.68	U 164		463.68	463.68	35.47	162.45	52.16	250.08	213.5		
Ciani, Charles	U							8	8	50.84	406.72	U 164		406.72	406.72	31.11	137.47	45.75	214.33	192.39		
Macknight, Brett	U			8	8	8	8	8	40	57.96	2318.4	U 164		2318.4	2318.4	177.35	418.44	260.82	856.61	1461.79		
Pavilla, Al	U			8	8	8	8	5	37	57.96	2144.5	U 164		2144.52	2144.52	164.05	514.82	252.3	931.17	1213.35		
Subrizi, Robert	U			8	8			3.5	19.5	57.96	1130.2	U 164		1130.22	1130.22	86.47	300.35	132.97	519.79	610.43		

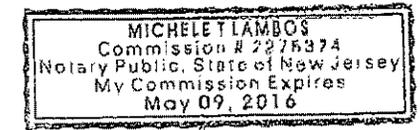
Key:
 RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

NOTE:
 1. All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
 2. Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
 3. Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

R. Cerminello certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

R. Cerminello [Signature] 6/30/15 [Signature]
 Print Name Officer/Designee Signature Date Signature of Notary Public

Sworn to before me, this day
20 of June, 2015



THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor or Subcontractor Barrier Electric Address 181 Avenue A Bayonne EIN # _____
 Payroll No. _____ For Week Ending 6-7-15 Project & Location: _____ PA Contract Number: EW 154.153

1 Employee Name, Address, and SS. No. (last 4 digits)	2 List Trade & Circle Work Classification (Journeyman or Apprentice / Class 1,2,3)	3 GWAC or TWICID # if issued	4 Day and Date	5 Total Hrs	6 Base Hourly Rate of Pay	7 Total Base Pay	8 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 RICA	15 Withholding Tax	16 Other	17 Total Deductions	18 Net		
							9 Hourly Rate	10 Paid to (Local # if Union is checked)	11 Total Paid									
							T	Mon	Tue								Wed	Thu
Waskiewicz, Jason	J		6/1															
			6/2	B														
			6/3	B														
			6/4	B														
			6/5	B														
			6/6															
			6/7															
				37	57.96	2144.5		164										
	Class 1, 2 or 3									2144.52	2144.52	164.05	296.63	252.3	652.98	1491.54		

Key:
 RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

NOTE:
 1. All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
 2. Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
 3. Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

R. Carmine certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.
R. Carmine Print Name Officer/Designee
Richard M. Signature
6/30/15 Date

Sworn to before me, this day
30 of June, 2015



Michele Lambos
 Signature of Notary Public

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor or Subcontractor
Barrier Electric Co Address 151 Avenue H Bayonne EIN # _____
 Payroll No. _____ For Week Ending 6/14/15 Project & Location: _____ PA Contract Number: 66R154,183

1 Employee's Name, Address, and SS. No. (last 4 digits)	2 Lst Trade & Circle Work Classification (Journeyman or Apprentice / Class 1,2,3)	3 SWAC or TWIC ID # If based	4 T I C	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 Withholding Tax	16 Other	17 Total Deductions	18 Net
				Mon	Tue	Wed	Thu	Fri	Sat	Sun				Hourly Rate	Paid to (local # if Union is circled)	Total Paid							
				6/3	6/4	6/10	6/11	6/12	6/13	6/14													
Brooks, Daniel	①		R	8	8	8	8	8			40	57.96	2318.4	164		2318.4	2318.4	177.36	621.68	260.82	1059.86	1258.54	
Ciani Charles	①		R	8	8	8	8	8			40	50.84	2033.6	164		2033.6	2033.6	155.57	521.75	228.78	906.1	1127.5	
Mocknight, Brent	①		R	8	8	8	8	8			40	57.96	2318.4	164		2318.4	2318.4	177.36	418.44	260.82	856.62	1461.78	
Portilla, Al	①		R	8	8	8	8	8			40	57.96	2318.4	164		2318.4	2318.4	177.36	576	272.77	1026.13	1292.27	
Subrizi, Robert	①		R	8		8	8	8			32	57.96	1854.7	164		1854.72	1854.72	141.88	422.43	218.21	782.52	1072.2	

Key:
 RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

NOTE:
 1. All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
 2. Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
 3. Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

R. Carmine certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

R. Carmine Print Name Officer/Designee
[Signature] Signature
6/15/15 Date

Sworn to before me, this day
30 of June, 2015

[Signature]
 Signature of Notary Public

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor or Subcontractor BARRETT Electric Co Address 181 AVENUE A Bayonne EIN # _____

Payroll No. _____ For Week Ending 6-21-15 Project & Location: _____ PA Contract Number: EW2154.183

1 Employee's Name, Address, and SS. No. (last 4 digits)	2 List Trade & Circle Work Classification (Journeyman or Apprentice / Class 1,2,3)	3 SWAC or TWICID # if issued	4 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 Withholding Tax	16 Other	17 Total Deductions	18 Net
			Mon	Tue	Wed	Thu	Fri	Sat	Sun				Hourly Rate	Paid to (Local # if Union is circled)	Total Paid							
			Mon	Tue	Wed	Thu	Fri	Sat	Sun													
Subrizi, Robert	<u>U</u>		6/15	6/16	6/17	6/18	6/19	6/20	6/21	36	57.98	2086.6	164		2086.56	2086.56	159.62	449.31	245.48	854.41	1232.15	
WASKWICZ, Jason	<u>U</u>			8	8	8	8	8		40	57.96	2318.4	164		2318.4	2318.4	177.35	275.24	272.75	725.34	1593.06	

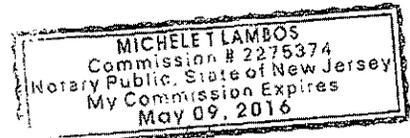
Key:
 RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

NOTE:
 1. All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
 2. Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
 3. Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

I, R. Cirminella certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

R. Cirminella Print Name Officer/Designee
[Signature] Signature
6/21/15 Date
Michelle Lambos Signature of Notary Public

Sworn to before me, this day 20 of June 2015



THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor or Subcontractor
Barrier Electric 82
 Address: **181 Avenue A Bayonne**
 E I N T
 Payroll No. For Week Ending **6/28/15** Project & Location: PA Contract Number: **EW154183**

1 Employees Name, Address, and SS. No. (last 4 digits)	2 List Trade & Circle Work Classification (Journeyman or Apprentice / Class 1,2,3)	3 SWAC or TWIC ID # If Issued	4 T I M E C	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits		12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With-holding Tax	16 Other	17 Total Deductions	18 Net	
				Day and Date										Hourly Rate	Paid to (Local # if Union is elected)								Total Paid
				Mon	Tue	Wed	Thu	Fri	Sat	Sun													
Sulbriz, Robert	①			0	0	4	0	5		9	57.96	521.64	164		521.64	521.64	39.9	161.82	61.36	269.08	258.56		
Waskiewicz, Jason	②			B	B	4	0	B		28	57.96	1622.9	164		1622.88	1622.88	124.16	382.51	186.64	693.31	929.57		

Key:
 RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

NOTE:
 1. All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
 2. Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
 3. Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

I, R. Ciommiello certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

R. Ciommiello Print Name Officer/Designee
[Signature] Signature
6/30/15 Date

Sworn to before me, this day
30 of June 2015

MICHELE LAMBOS
 Commission # 2275374
 Notary Public State of New Jersey
 My Commission Expires
 May 09, 2016

[Signature]
 Signature of Notary Public

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor Canfil Enterprises, Inc.- EWR 154.183					Address 2045 LINCOLN HIGHWAY					EIN #					
Payroll # 13			Week Ending Date 2015-06-06			Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ					PA Contract Number 69950373				

1	2	3	4	5							6	7	8	9			10	11	12	13	14	15	16	17	18											
				Day and Date										Supplemental Benefits																						
				TIME	SU	MO	TU	WE	TH	FR				SA	Total Hrs	Base Hourly Rate of Pay										Total Base Pay	Hourly Rate	Paid To (Local # if Union Is checked)	Total Paid	Gross Amt Earned	Taxable Gross Wages	FICA	Withholding Tax	Other	Total Deductions	Net
Albert Patrick Andrews	J WOH A : H		RT OT ST O	8.00 2.00	8.00	8.00 2.00	8.00 2.00	8.00 2.00	40.00 8.00	42.570 63.855	1702.80 510.84	35.062	X U 825 E O	1682.96	2363.64	2213.61	146.47	472.61	77.48	680.66	1673.05															
Gilberto Gada	X J OEA A : H	1710 - TPTUPH	RT OT ST O	8.00	8.00 5.0	8.00 1.00	8.00	8.00	40.00 1.00	46.070 69.120	1842.80 103.68	30.013	X U 825 E O	1245.64	1946.46	1946.46	123.31	385.55	56.12	576.98	1369.50															
Antonio Garcia	X J LBJ A : H		RT OT ST O	8.00 1.50	8.00	8.00 5.0	8.00	8.00	40.00 2.00	35.750 53.625	1439.00 107.25	26.280	X U 472 E O	1103.76	1537.25	1537.25	102.47	220.05	63.63	386.75	1150.50															
Armando Gutierrez	J WDH A : H		RT OT ST O	8.00 2.00	8.00	8.00 2.00	8.00 2.00	8.00 2.00	40.00 8.00	42.570 63.855	1702.80 510.84	35.062	X U 825 E O	1682.96	2363.64	2213.64	146.47	472.61	77.48	690.56	1673.08															
Charles Halber	J WD A : H		RT OT ST O	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	40.00 10.00	52.560 78.750	2100.00 787.50	61.425	X U 825 E O	3171.40	4437.50	2867.50	182.44	671.32	101.07	954.83	3482.67															
Timothy Hoshinn	X J LBS A : H		RT OT ST O	8.00 1.50	8.00 1.50	3.50	7.00 1.00	8.00	34.50 4.00	36.150 64.224	1247.18 216.91	25.279	X U 472 E O	1011.76	1726.40	1464.09	116.81	404.83	853.30	1373.63	352.57															
Scott J Jacobs	X J OEA A : H		RT OT ST O	8.00 1.50	8.00				16.00 1.50	46.070 69.115	737.12 103.67	36.714	X U 825 E O	539.62	1946.47	640.79	123.31	365.13	66.12	556.56	1389.91															

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor
Conti Enterprises, Inc. - EWR 154.183

Address
2045 LINCOLN HIGHWAY

F I N #

Payroll #
13

Week Ending Date
2015-06-06

Project Name & Location
EWR154.183 Aviation Fuel Sys, Newark NJ

PA Contract Number
69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid							
				U	1	2	3	4	5	6													
Carlos A. Lamego	X J LBJ A : H	1710 SLAPNG	RT OT ST O		8.00 .50	8.00 .50	8.00	8.00	8.00		32.00 1.00	35.750 53.620	1144.00 53.62	26.290	X U 472 E O	667.24	1208.12	1197.62	84.66	769.63	50.73	307.02	872.10
Rovin Lamego	X J LBJ A : H	1510 - XEMZHY	RT OT ST O		8.00 1.00	8.00 .50	8.00 1.00	8.00	8.00		40.00 2.50	35.750 53.620	1430.00 134.07	28.280	X U 472 E O	1116.92	1564.07	1564.07	104.72	438.57	64.80	607.39	956.68
Angel Laureano	X J LBJ A : H		RT OT ST O		8.00	8.00 .50	8.00 50	8.00	8.00		40.00 1.00	35.750 53.620	1430.00 53.62	26.280	X U 472 E O	1077.18	1483.62	1483.62	95.88	409.65	61.65	570.32	913.30
Jeffrey W. Lecha	X J OEB A : H		RT OT ST O				8.00 1.00	8.00	8.00		16.00 1.00	44.480 66.720	711.68 66.72	30.346	X U 825 E O	515.92	778.40	778.40	49.35	166.66	27.24	185.05	593.35
David Mancori	X J DEC A : H		RT OT ST O		8.00 1.50	7.00	1.00 3.00	8.00 2.00	8.00 1.00		32.00 7.50	42.570 53.860	1362.24 478.95	32.280	X U 825 E O	1775.05	2788.42	1841.19	176.94	689.07	87.59	963.55	1824.87
John F. McGuire	X J OEB A : H		RT OT ST O		8.00						8.00	44.480	355.84 0.00	20.480	X U 825 E O	235.84	1630.08	355.84	115.94	340.83	64.05	520.82	1309.26
Jose Ponicacio	X J LBJ A : H	1810 - ZUTKNG	RT OT ST O		8.00 1.50	8.00 1.00	8.00 1.50	8.00 1.00	8.00		40.00 5.00	35.750 53.620	1430.00 268.14	26.290	X U 472 E O	1182.60	1698.14	1698.14	112.96	487.76	69.46	670.18	1027.95

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor Conti Enterprises, Inc.- EWR 154.183						Address 2045 LINCOLN HIGHWAY						EIN #											
Payroll # 13			Week Ending Date 2015-06-06			Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ						PA Contract Number 69950373											
1	2	3	4	5						6	7	8	9		10	11	12	13	14	15	16	17	18
Name Address Last Four Digits of Social Security Number	List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	SWAC or TWIC ID # If Issued	T I M E	Day and Date						Total Hrs	Base Hourly Rate of Pay	Total Base Pay	Supplemental Benefits		Gross Amt Earned	Taxable Gross Wages	FICA	With- holding tax	Other	Total Deductions	Net		
				S	MO	TU	WE	TH	FR				SA	Hourly Rate								Paid To (Local # if Union Is checked)	Total Paid
				31	1	2	3	4	5				6										

FALSIFICATION OF THIS STATEMENT IS A PUNISHABLE OFFENSE
Brenda Davis certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

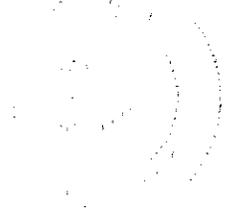
Brenda Davis
 Print Name Officer/Designee

Brenda Davis
 Signature

Gina M Setzer
 Signature of Notary Public

7-10 20 15
 DATE

Gina M Setzer
 Notary Public
 New Jersey
 My Commission Expires 12-31-18



**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor Conli Enterprises, Inc.- EWR 154.183						Address 2045 LINCOLN HIGHWAY						FIN #											
Payroll # 13			Week Ending Date 2015-06-06			Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ						PA Contract Number 69950373											
1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # if Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid							
				31	1	2	3	4	5	6													
Edward Riba	X J OEA A : H	1710 NYSREN	RT OT ST O		8.00 1.00	8.00 1.50	8.00 1.50	8.00	32.00 4.00	46.070 59.113	1474.24 276.45	51.117	X U 825 E O	1190.20	2119.26	1750.09	134.25	422.01	74.18	631.01	1488.22		
Manuel Soares	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00 50	8.00 1.00	8.00	40.00 1.50	35.750 53.627	1430.00 80.44	26.280	X U 472 E O	1090.64	1510.44	1510.44	100.73	239.42	62.06	402.81	1107.63		
Robert White	X J LBJ A : H	1810 PIPGAF	RT OT ST O	8.00	8.00 1.00	8.00 1.50	8.00 1.00	8.00	40.00 3.50	35.750 53.625	1430.00 187.70	26.280	X U 472 E O	1143.20	1617.70	1617.70	107.72	253.02	66.54	427.28	1190.42		

Key:

RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

NOTE:

- All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
- Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
- Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

Sworn to before me, this day
10th of July, 2015

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Mgr (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Cont: Enterprises, 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 Cont: Enterprises, 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 otherwise under this contract required to be submitted for the subject period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wages rates contained in any wage determination incorporated into the contract and that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

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 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 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 (CRAFT)

EXPLANATION

<u>EXCEPTION (CRAFT)</u>	<u>EXPLANATION</u>

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor: Conti Enterprises, Inc.- EWR 154.183
Address: 2045 LINCOLN HIGHWAY
EIN #:

Payroll #: 14
Week Ending Date: 2015-06-13
Project Name & Location: EWR154.183 Aviation Fuel Sys, Newark NJ
PA Contract Number: 69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or FWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid							
				7	8	9	10	11	12	13													
Albert Patrick Andrews	J WDH A : H		RT OT ST O	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00		40.00 10.00	42,570 63,857	1702.80 638.57	35,428	X U 825 E O	1771.40	2401.37	2341.37	148.57	516.18	81.95	746.70	1744.67	
Orlando Swade	X J OEA A : H	1715- TPTUPH	RT OT ST O	8.00	8.00	8.00	8.00	8.00 .50		40.00 .50	46,070 69,120	1842.80 34.55	29,662	X U 825 E O	1201.32	1877.36	1877.36	118.67	362.67	85.71	547.20	1330.16	
Antonio Garcia	X J LBJ A : H		RT OT ST O	8.00 1.00	8.00 1.00	8.00		8.00		32.00 2.00	35,750 53,630	1144.00 107.26	26,280	X U 472 E O	893.52	1251.26	1251.26	83.37	158.08	51.88	283.14	958.12	
Rini Gomez	X J CPF A : H		RT OT ST O			8.00	8.00	8.00		24.00	51,220	1228.28	29,113	X U 254 E O	698.72	1229.28	1229.28	76.72	181.65	122.92	380.65	848.59	
Aramelo Gutierrez	J WDH A : H		RT OT ST O	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00		40.00 10.00	42,570 63,859	1702.80 638.59	35,428	X U 825 E O	1771.40	2401.38	2341.33	148.58	516.18	81.95	746.71	1744.68	
Charles Hatcher	J WD A : H		RT OT ST O	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00		40.00 10.00	52,500 78,750	2100.00 787.50	83,426	X U 825 E O	3171.40	4437.50	2867.50	182.43	671.25	101.07	954.79	3482.71	
Tanobly Hoffman	X J LBS A : H		RT OT ST O	8.00 .50	8.00	5.00	8.00	7.00		36.50 .50	56,150 84,220	1318.48 27.11	26,261	X U 472 E O	872.40	1527.35	1346.59	102.66	335.03	846.31	1284.00	242.35	

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor
Conli Enterprises, Inc.- EWR 154.183

Address
2045 LINCOLN HIGHWAY

F I N #

Payroll #
14

Week Ending Date
2015-06-13

Project Name & Location
EWR154.183 Aviation Fuel Sys, Newark NJ

PA Contract Number
69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # if Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid							
				U	8	9	10	11	12	13													
Scott J Jacobs	X J OEB A : H		RT OT ST O					8.00		8.00	44,480	355.84 0.00 6.66 64.05	29,475	X U 325 E O	235.80	1839.09	355.84	115.94	326.51	64.05	506.53	1323.56	
Carlos A. Lamego	X J LBJ A : H		RT OT ST O		8.00 50	8.00	8.00	8.00	8.00 50		36.00 1.00	35,750 53,620	1430.00 53.62 0.00 61.68	26,260	X U 472 E O	1077.46	1483.62	1483.62	98.97	336.69	61.69	496.35	987.27
Kevin Lamego	X J LBJ A : H	1810 XFM ZMY	RT OT ST O		8.00 1.00	8.00	8.00	8.00	8.00 50		39.00 1.50	35,750 53,620	1430.00 80.44 0.00 62.66	26,260	X U 472 E O	1090.64	1510.44	1510.44	100.72	419.28	62.66	582.66	927.78
Angel Laureano	X J LBJ A : H		RT OT ST O		8.00 50	8.00	8.00	8.00	8.00 50		40.00 1.00	35,750 53,620	1430.00 53.62 0.00 61.09	26,260	X U 472 E O	1077.46	1483.62	1483.62	98.97	409.65	61.69	570.31	913.31
David Marcano	X J OEB A : H		RT OT ST O		8.00 50	8.00	4.00	8.00			28.00 50	42,670 63,860	1191.96 31.93 0.00 51.03	28,730	X U 625 E O	847.56	1458.03	1273.89	92.57	247.73	51.03	391.26	1066.75
Nick Pizzolacovo	X J LBJ A : H		RT OT ST O				8.00	8.00	8.00 50		24.00 50	35,750 53,620	254.00 80.81 0.00 60.72	28,281	X U 472 E O	643.95	1450.81	884.81	97.23	204.41	60.72	422.36	1028.45
Jose Purificacio	X J LBJ A : H	1810 ZUT KN4	RT OT ST O		8.00 1.00	8.00 1.00	8.00	8.00	8.00 50		40.00 2.50	35,750 53,620	1430.00 134.07 0.00 64.50	25,280	X U 472 E O	1116.92	1564.07	1564.07	104.22	438.58	64.60	607.40	956.67

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor
Conti Enterprises, Inc.- EWR 154.183

Address
2045 LINCOLN HIGHWAY

EIN #

Payroll #
14

Week Ending Date
2015-06-13

Project Name & Location
EWR154.183 Aviation Fuel Sys, Newark NJ

PA Contract Number
69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NY'S DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # If Union Is checked)	Total Paid							
				7	8	9	10	11	12	13													
Edward Rebo	X J OEA A : H	1710 USUFCN	RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00 .50	46.070 60.120	1842.60 34.56	28.662	X U E O	825 1201.32	1877.36	1877.36	118.92	342.16	65.71	526.79	1350.57
Thomas Smith	X J OEA A : H		RT OT ST O		8.00	8.00	8.00		8.00		32.00	45.675	1461.62 0.00	28.480	X U E O	825 843.30	1838.68	1461.52	116.44	485.79	64.33	666.56	1171.52
Manuel Soares	X J LBJ A : H		RT OT ST O		8.00	8.00 1.00	8.00	8.00	8.00		40.00 1.00	35.760 53.630	1430.00 53.63	26.280	X U E O	472 1077.48	1463.63	1463.63	98.97	224.61	61.69	285.27	1698.36
Dryon Wayne	J WD A : H		RT OT ST O					8.00 2.00	8.00 1.00		16.00 3.00	52.500 78.750	840.00 206.25	65.651	X U E O	825 1627.30	2093.25	1076.25	65.00	221.39	37.67	327.66	1772.18
Robert White	X J LBJ A : H	1810 PIP GAF	RT OT ST O			8.00	8.00	8.00	8.00		32.00 .50	35.760 53.620	1144.00 26.81	26.281	X U E O	472 894.12	1170.81	1170.81	76.13	161.53	48.77	278.43	892.38

Key:

RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
U - Union E - Employee O - Other
J - Journeyman A - Apprentice H - Helper

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor Cont'l Enterprises, Inc.- EWR 154.183						Address 2045 LINCOLN HIGHWAY						F.I.N.#											
Payroll # 14			Week Ending Date 2015-06-13			Project Name & Location EWR154.183 Aviation Fuel Sys. Newark NJ						PA Contract Number 69950373											
1	2	3	4				5	6	7	8			9	10	11	12	13	14	15	16	17	18	
Name Address Last Four Digits of Social Security Number	List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	SWAC or TWIC ID # If Issued	TIME	Day and Date							Total Hrs	Base Hourly Rate of Pay	Total Base Pay	Supplemental Benefits			Gross Amt Earned	Taxable Gross Wages	FICA	With- holding tax	Other	Total Deductions	Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid							
				7	8	9	10	11	12	13													

NOTE:

1. All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
2. Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
3. Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

Sworn to before me, this day
10th of July, 20 15

FALSIFICATION OF THIS STATEMENT IS A PUNISHABLE OFFENSE

I, Brenda Davis, certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Brenda Davis
Print Name Officer/Designee

Brenda Davis
Signature

Gina M Setzer
Signature of Notary Public

7/10, 20 15
DATE

Gina M Setzer
Notary Public
New Jersey
My Commission Expires 12-31-18



Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Mgr (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Canti Enterprises 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 Canti Enterprises 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 otherwise under this contract required to be submitted for the subject period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wages rates contained in any wage determination incorporated into the contract and that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

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 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 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 (CRAFT)

EXPLANATION

<u>EXCEPTION (CRAFT)</u>	<u>EXPLANATION</u>

**THE PORT AUTHORITY
OF NY & NJ**

**Certification of Payroll
To Be Submitted With Application For Payment**

Name Of Contractor/Subcontractor: Conti Enterprises, Inc.- EWR 154.183
Address: 2045 LINCOLN HIGHWAY
FIN #

Payroll #: 15
Week Ending Date: 2015-06-20
Project Name & Location: EWR154.183 Aviation Fuel Sys, Newark NJ
PA Contract Number: 69950373

1 Name Address Last Four Digits of Social Security Number	2 Lic Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAG or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid							
				14	15	16	17	18	19	20													
				14	15	16	17	18	19	20													
Albert Patrick Andrews	J WDH A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	40.00 10.00	42.670 63.660	1702.80 638.60	35.428	X U 825 E O	1771.40	2491.40	2541.40	148.58	510.17	81.85	746.70	1744.70	
William B Dadd	J FS A : H		RT OT ST O				6.00 2.50			8.00 2.50	38.000 57.000	384.00 142.50	26.278	X U 172 E O	275.97	2014.00	448.50	132.72	349.32	98.09	660.10	1433.67	
Lapso H Del Nero	X J OEB A : H		RT OT ST O		8.00 .50					8.00 .50	44.480 66.720	355.84 33.36	30.346	X U 825 E O	257.94	1885.28	389.20	119.46	512.07	65.99	637.52	1187.76	
Junior Ebe	J WDH A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	40.00 10.00	42.570 63.800	1702.80 636.00	35.428	X U 825 E O	1771.40	2491.40	2541.40	148.58	510.17	81.85	746.70	1744.70	
Gilberto Garcia	X J DEA A : H	1715 TPT UPH	RT OT ST O		8.00 1.50	8.00 1.50	8.00 1.50	8.00	8.00 2.00	40.00 6.50	46.071 69.112	1842.82 449.23	31.541	X U 825 E O	1466.54	2202.05	2292.05	145.19	500.48	89.22	725.89	1506.16	
Antonio Graco	X J LBJ A : H		RT OT ST O		8.00 1.50	8.00	8.00 2.00	8.00	8.00	40.00 3.50	35.756 63.829	1430.80 167.70	26.280	X U 472 E O	1143.20	1917.70	1617.70	107.72	239.73	66.54	413.99	1203.71	
Rene Grimes	X J CPF A : H		RT OT ST O		8.00 1.00	8.00	8.00 1.00	8.00	8.00	40.00 2.00	61.220 76.830	2048.80 152.66	29.795	X U 254 E O	1251.43	2202.46	2202.46	136.65	461.67	220.24	808.36	1394.10	

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor
Conti Enterprises, Inc.- EWR 154.183

Address
2045 LINCOLN HIGHWAY

EIN #

Payroll #
15

Week Ending Date
2015-06-20

Project Name & Location
EWR154.183 Aviation Fuel Sys, Newark NJ

PA Contract Number
69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # if issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Am't Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid							
				14	15	16	17	18	19	20													
Amanda Gutierrez	J WDH A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	40.00 10.00	42.570 63.853	1702.80 639.50	35.428	X U E 625 O	1771.40	2491.99	2341.39	148.57	516.17	81.85	745.69	1744.70	
Charles Hatcher	J WD A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	40.00 10.00	52.500 78.750	2100.00 787.50	63.428	X U E 625 O	3171.40	4437.50	2887.50	182.44	671.31	101.67	954.82	3437.68	
Nonwood Hill	X J OEA A : H		RT OT ST O				8.00 7.50	8.00 2.00	8.00	24.00 4.50	44.373 65.183	1084.96 297.87	31.808	X U E 625 O	886.62	1362.93	1362.83	84.40	279.47	47.89	413.56	949.27	
Timothy Houffman	X J LBS A : H		RT OT ST O		8.00 1.50	8.00 2.50	2.00	8.00 1.00	8.00 1.50	34.00 6.50	36.150 54.226	1229.10 352.47	26.260	X U E 472 O	1064.36	1786.47	1681.57	120.33	430.31	856.09	1406.73	391.74	
Raymond J Kostrewa	X J LBJ A : H		RT OT ST O		8.00 .50	8.00 1.50				16.00 2.00	35.750 53.625	672.00 107.25	26.280	X U E 472 O	473.04	579.25	579.25	45.18	86.53	27.78	159.79	519.46	
Carlos A Lamoga	X J LBJ A : H	1710 SLA PWC	RT OT ST O		8.00 2.00	8.00 1.50	8.00 2.00	8.00 1.50	8.00 2.00	40.00 9.50	35.780 53.627	1430.00 609.46	26.280	X U E 472 O	1306.68	1939.48	1939.46	128.69	497.86	78.19	704.54	1234.92	
Kevin Lamoga	X J LBJ A : H	1510 XFH ZMY	RT OT ST O		8.00 1.50		8.00 2.50	8.00 2.50	8.00	32.00 6.50	35.750 53.625	1144.00 349.57	26.281	X U E 472 O	1011.80	1492.57	1487.57	80.11	410.36	60.41	569.88	922.60	

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OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor
Conti Enterprises, Inc. EWR 154.183

Address
2045 LINCOLN HIGHWAY

EIN #

Payroll #
15

Week Ending Date
2015-06-20

Project Name & Location
EWR154.183 Avlation Fuel Sys, Newark NJ

PA Contract Number
69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union Is checked)	Total Paid							
				14	15	16	17	18	19	20													
Angel Laureano	X J LBJ A : H		RT OT ST O		8.00 1.50	8.00 1.50	8.00 2.00	8.00 1.80	8.00 2.50	40.00 9.00	35.750 53.625	1430.00 482.65	26.260	X U 472 E O	1267.72	1912.65	1912.65	126.54	671.67	77.22	775.83	1136.82	
David Maroon	X J DEC A : H		RT OT ST O		4.00	8.00	2.00 1.00	8.00 1.00		22.00 2.00	42.570 53.660	936.54 127.72	30.705	X U 825 E O	736.92	1994.26	1064.26	128.50	417.93	62.98	614.23	1380.03	
John F McGuire	X J DEA A : H		RT OT ST O		8.00 1.50	8.00 1.50	8.00 1.50	8.00 1.00	8.00	40.00 5.50	45.434 67.697	1817.37 372.94	31.202	X U 825 E O	1422.42	2150.31	2150.31	138.79	403.55	76.65	679.04	1511.27	
Anthony Myrnyj	X J DEA A : H		RT OT ST O				5.50 2.50		8.00	13.50 2.50	45.128 69.112	609.23 172.78	31.763	X U 825 E O	508.52	1815.27	742.01	121.51	457.25	67.84	645.89	1269.47	
Nick Pietalowski	X J LBJ A : H		RT OT ST O		8.00 .50	8.00 1.50	8.00 2.50	8.00 2.50		32.00 7.00	35.750 53.625	1144.00 315.38	26.260	X U 472 E O	1024.92	1519.38	1519.38	100.85	260.13	61.38	442.38	1077.00	
Jose Pasticarino	X J LBJ A : H	1810 ZCIT KN4	RT OT ST O		8.00 .50	8.00 2.00	8.00 2.50	8.00 2.50	8.00	40.00 7.50	35.750 53.625	1420.00 402.19	26.260	X U 472 E O	1248.32	1812.19	1832.19	121.69	540.21	74.30	735.20	1055.99	
Edward Riva	X J DEA A : H	1710 USV FCN	RT OT ST O		8.00 .50	8.00 2.00	8.00 2.50	8.00 2.00	8.00	40.00 7.00	46.070 69.111	1842.60 483.78	31.678	X U 825 E O	1489.76	2326.59	2326.58	147.34	491.55	81.43	720.56	1666.22	

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor
Conti Enterprises, Inc.- EWR 154.183

Address
2045 LINCOLN HIGHWAY

F I N #

Payroll #
15

Week Ending Date
2015-06-20

Project Name & Location
EWR154.183 Aviation Fuel Sys, Newark NJ

PA Contract Number
69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # if issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union Is checked)	Total Paid							
				U	15	16	17	18	19	20													
Thomas Smith	X J OEA A : H		RT OT ST O		3.00	8.00 2.00					11.00 2.00	47.070 69.110	517.77 138.22	31.748	X U E 825	412.72	555.99	555.99	41.54	79.22	29.96	140.72	512.27
Manuel Steves	X J LBJ A : H		RT OT ST O		9.00 1.00	3.00 2.50	8.00 1.50	8.00 1.50	8.00 1.50		40.00 5.50	35.750 53.626	1430.00 348.57	26.263	X U E 472	1222.04	1778.57	1778.57	118.20	297.58	72.35	488.17	1290.45
Matthew Vucelless	X J OEA A : H		RT OT ST O				8.00 1.00	8.00 50	8.00 1.00		24.00 2.50	40.070 69.112	1105.68 172.78	30.821	X U E 825	618.05	1278.46	1278.46	80.90	229.57	44.74	355.70	922.76
Bryan Wayne	J WJD A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00		40.00 10.00	52.500 78.750	2100.00 787.50	63.426	X U E 825	3171.40	4437.50	2987.50	182.43	681.93	101.07	1165.43	3272.07
Robert White	X J LBJ A : H	1710 PIP GAF	RT OT ST O		8.00 50	8.00 2.00	8.00 2.50	8.00 2.50	8.00 1.50		40.00 0.00	35.750 53.826	1430.00 482.93	26.263	X U E 472	1207.22	1912.63	1912.63	126.94	338.69	77.22	542.85	1369.78

Key:

RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
U - Union E - Employee O - Other
J - Journeyman A - Apprentice H - Helper

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor Conti Enterprises, Inc.- EWR 154.183						Address 2045 LINCOLN HIGHWAY						EIN #													
Payroll # 15			Week Ending Date 2015-06-20			Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ						PA Contract Number 69950373													
1	2	3	4	5							6	7	8	9			10	11	12	13	14	15	16	17	18
Name Address Last Four Digits of Social Security Number	List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	SWAC or TWIC ID # If Issued	T I M E	Day and Date							Total Hrs	Base Hourly Rate of Pay	Total Base Pay	Supplemental Benefits			Gross Amt Earned	Taxable Gross Wages	FICA	With- holding tax	Other	Total Deductions	Net		
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid									
				14	15	16	17	18	19	20															

NOTE:

- All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
- Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
- Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

Sworn to before me, this day
10th of July, 20 15

FALSIFICATION OF THIS STATEMENT IS A PUNISHABLE OFFENSE

Brenda Davis certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

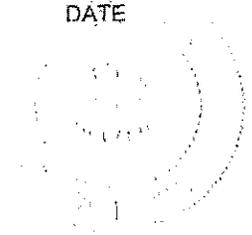
Brenda Davis
Print Name Officer/Designee

Brenda Davis
Signature

Gina M Setzer
Signature of Notary Public

7/10 20 15
DATE

Gina M Setzer
Notary Public
New Jersey
My Commission Expires 12-31-18



Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Mgr (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Cont. Enterprises, 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 Cont. Enterprises, 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 otherwise under this contract required to be submitted for the subject period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wages rates contained in any wage determination incorporated into the contract and that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

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 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 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 (CRAFT)

EXPLANATION

<u>EXCEPTION (CRAFT)</u>	<u>EXPLANATION</u>

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor Conti Enterprises, Inc.- EWR 154.183				Address 2045 LINCOLN HIGHWAY				FIN #			
Payroll # 16		Week Ending Date 2015-06-27		Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ				PA Contract Number 69950373			

1	2	3	4	5							6	7	8	9			10	11	12	13	14	15	16	17	18
				Day and Date										Supplemental Benefits											
				T M E	S U	MO	TU	WE	TH	FR				SA	Total Hrs	Base Hourly Rate of Pay									
	21	22	23	24	25	26	27																		
Alben Patrick Andrews	J WDH A : H		RT OT ST O	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00		40.00 10.00	42.570 63.858	1702.80 638.58	35.428	X U 825 E O	1771.40	2491.38	2341.38	148.28	516.16	81.95	746.69	1744.69			
Junior Ebe	J WDH A : H		RT OT ST O	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00		40.00 10.00	42.570 63.858	1702.80 638.58	35.428	X U 825 E O	1771.40	2491.38	2341.38	148.27	655.79	81.95	888.81	1605.09			
Joseph Eric III	X J LBJ A : H		RT OT ST O		8.00 1.00	8.00 1.00	8.00 1.00	8.00 1.50		32.00 4.50	35.750 53.620	1144.00 241.33	26.261	X U 472 E O	959.24	1365.33	1385.31	92.11	330.61	58.53	479.25	506.08			
Gilberto Goads	X J OEA A : H	1715 TPT UPH	RT OT ST O	8.00 1.00	8.00 1.50	8.00 1.00	8.00 1.00	8.00		43.00 6.50	45.070 69.109	1842.80 449.71	31.541	X U 825 E O	1465.64	2292.01	2292.01	145.19	590.47	80.22	775.86	1566.13			
Armando Oraca	X J LBJ A : H		RT OT ST O	8.00 1.00	8.00 .50		8.00	8.00		32.00 1.50	35.751 53.620	1144.02 80.43	26.261	X U 472 E O	839.49	1730.25	1224.45	115.92	266.14	70.76	454.42	1283.83			
Mont Groves	X J CPF A : H		RT OT ST O	8.00	8.00	8.00 .50	8.00 .50	8.00		40.00 1.00	51.220 76.640	2048.80 76.84	29.463	X U 264 E O	1267.29	2125.64	2125.64	131.78	425.97	212.87	779.33	1585.31			
Armando Gutierrez	J WDH A : H		RT OT ST O	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00		40.00 10.00	42.570 63.659	1702.80 638.59	35.428	X U 825 E O	1771.40	2491.39	2341.39	148.55	516.16	81.95	746.69	1744.70			

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor: Conti Enterprises, Inc.- EWR 154.183
 Address: 2045 LINCOLN HIGHWAY
 EIN#

Payroll # 16
 Week Ending Date 2015-06-27
 Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ
 PA Contract Number 69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # if issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid							
				U	22	23	24	25	26	27													
Charles Hatcher	J WB A : H		RT OT ST O	8.00 2.00	8.00 2.00	8.00 7.00	8.00 2.00	8.00 2.00	40.00 10.00	52.500 78.750	2100.00 787.50 0.00 101.07	63.478	X U E 825 O	3171.40	4437.50	2897.50	182.43	671.31	101.07	954.81	3482.69		
Norman Hill	X J OEB A : H		RT OT ST O	8.00	8.00 1.00	8.00 1.00	8.00 1.00	8.00 1.00	40.00 4.00	43.334 64.575	1733.36 258.30 0.00 69.71	39.820	X U E 825 O	1356.98	1991.60	1991.60	126.34	499.42	69.71	695.47	1296.19		
Terrilly Koufhan	X J LBS A : H		RT OT ST O	8.00 2.50	8.00 1.00	8.00	8.00 2.00	8.00 2.50	40.00 8.00	38.150 64.226	1446.00 433.81 0.00 859.83	20.280	X U E 472 O	1281.44	1679.81	1879.81	125.63	469.91	859.03	1443.57	436.24		
Garba A. Lamego	X J LBJ A : H	1710 SLA PNG	RT OT ST O	8.00 1.00	8.00 2.00	8.00 1.00	8.00 1.00	8.00	40.00 5.00	35.750 53.638	1430.00 268.14 0.00 69.45	26.280	X U E 472 O	1182.60	1658.14	1658.14	112.95	411.12	69.45	583.52	1104.62		
Kevin Lamego	X J LBJ A : H	1570 - X FM ZNY	RT OT ST O	8.00 1.00	8.00 1.00	8.00 1.50	8.00 1.00	8.00 1.50	40.00 6.00	35.750 53.628	1430.00 321.77 0.00 71.39	26.280	X U E 472 O	1708.68	1751.77	1751.77	116.45	508.75	71.39	696.58	1055.19		
Angel Laureans	X J LBJ A : H		RT OT ST O		8.00 .50		8.00	8.00	24.00 5.00	35.750 53.620	858.01 28.81 0.00 60.41	26.261	X U E 472 O	643.88	1492.57	884.82	99.10	410.37	60.41	589.88	922.69		
David Marcel	X J OEB A : H		RT OT ST O	5.00	2.00		4.00 1.00	6.50	15.50 3.00	42.571 63.860	656.85 101.58 0.00 93.32	31.870	X U E 825 O	589.60	2660.73	851.43	168.24	645.47	93.12	907.43	1753.30		

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor Conti Enterprises, Inc.- EWR 154.183				Address 2045 LINCOLN HIGHWAY				EIN #															
Payroll # 16		Week Ending Date 2015-06-27		Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ				PA Contract Number 69950373															
1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # if issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Am't Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union Is checked)	Total Paid							
				21	22	23	24	25	26	27													
John F McGuire	X J OEB A : H		RT OT ST O	8.00 1.00	8.00 .50	8.00		8.00		32.00 1.50	44.480 66.720	1423.36 100.08 0.00 53.32	30.140	X U 425 E O	1009.70	1523.44	1523.44	96.58	749.26	53.32	398.16	1124.28	
Anthony Myrzej	X J OEA A : H		RT OT ST O	8.00 1.00	8.00 .50	8.00 .50	8.00 .50	8.00 1.00		46.00 3.50	45.762 68.434	1836.08 239.52 0.00 72.44	30.666	X U 825 E O	1333.98	2669.60	2669.60	134.12	511.95	72.44	715.52	1354.08	
Nick Petrovacev	X J LBJ A : H		RT OT ST O		8.00			8.00		16.00	35.750	572.00 0.00 0.00 23.90	26.280	X U 472 E O	420.43	572.00	572.00	38.20	73.89	23.80	135.99	436.01	
Jose Purificacio	X J LBJ A : H	1810 ZUT KNU	RT OT ST O	8.00 1.00	8.00 1.00	8.00 1.50	8.00 1.00	8.00 1.50		40.00 6.00	35.750 53.629	1430.00 321.77 0.00 71.39	26.280	X U 472 E O	1208.08	1751.77	1751.77	116.46	508.75	71.39	696.60	1055.17	
Edward Reno	X J OEA A : H	1710 USV FCW	RT OT ST O	8.00 1.00	8.00 1.00	8.00 1.00	8.00 1.00	8.00 1.50		49.00 5.50	46.070 60.113	1642.80 386.12 0.00 77.80	31.262	X U 425 E O	1422.42	2222.92	2222.92	140.81	457.08	77.80	675.69	1647.23	
Manuel Soares	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00 .50	8.00	8.00		48.00 .50	35.750 53.620	1430.00 20.81 0.00 60.72	26.280	X U 472 E O	1054.35	1456.81	1456.81	97.23	214.91	60.72	372.86	1083.95	
Mattina Vaccines	X J OEA A : H		RT OT ST O	8.00	8.00	8.00 1.00	8.00 1.02	8.00		49.00 2.00	46.070 69.110	1642.80 138.22 0.00 69.34	30.182	X U 825 E O	1267.64	1981.02	1981.02	125.48	473.04	68.34	668.46	1312.56	

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Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor Conti Enterprises, Inc.- EWR 154.183										Address 2045 LINCOLN HIGHWAY					EIN #								
Payroll # 16			Week Ending Date 2015-06-27			Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ					PA Contract Number 69950373												
1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union Is checked)	Total Paid							
				21	22	23	24	25	26	27													
Bryan Wayne	J WD A : H		RT OT ST O	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00		40.00 10.00	52.550 78.750	2100.00 787.50	63.428	X U 825 E O	3171.40	4437.50	2867.50	102.44	881.00	101.07	1165.41	3272.09	
Robert White	X J LBJ A : H	1810 PIP GAF	RT OT ST O	8.00 1.00	8.00 50	8.00 50	8.00 1.50	8.00 1.50		40.00 4.50	52.750 50.624	2110.00 241.51	26.260	X U 472 E O	1160.48	1671.32	1671.32	111.21	766.15	68.48	445.84	1225.48	

Key:
 RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

NOTE:
 1. All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
 2. Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
 3. Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

Sworn to before me, this day
10th of July, 2015

FALSIFICATION OF THIS STATEMENT IS A PUNISHABLE OFFENSE

Gina M Setzer
 Notary Public
 New Jersey
 My Commission Expires 12-31-18

Brenda Davis certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Brenda Davis
Print Name Officer/Designee

Brenda Davis
Signature

[Signature]
Signature of Notary Public

7/10 20 15
DATE

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Mgr (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Conti Enterprises 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 Conti Enterprises 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 otherwise under this contract required to be submitted for the subject period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wages rates contained in any wage determination incorporated into the contract and that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

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 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 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 (CRAFT)

EXPLANATION

<u>EXCEPTION (CRAFT)</u>	<u>EXPLANATION</u>

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor Conli Enterprises, Inc.- EWR 154.183					Address 2045 LINCOLN HIGHWAY					EIN #					
Payroll # 17			Week Ending Date 2015-07-04			Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ					PA Contract Number 69950373				

1	2	3	4	5							6	7	8	9			12	13	14	15	16	17	18														
				Name Address Last Four Digits of Social Security Number	List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	SWAC or TVAC ID # if Issued	TIME	Day and Date							Total Hrs	Base Hourly Rate of Pay								Total Base Pay	Supplemental Benefits			Gross Amt Earned	Taxable Gross Wages	FICA	With- holding tax	Other	Total Deductions	Net			
								S	MO	TU				WE											TH	FR	SA								Hourly Rate	Paid To (Local # if Union is checked)	Total Paid
								28	29	30				1											2	3	4										
Albert Patrick Anderson	J WDH A : H		RT OT ST O	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00	8.00	40.00 8.00	43.170 64.609	1726.80 516.87	35.062	X U 825 E O	1682.05	2393.67	2243.67	142.33	482.63	78.53	703.49	1690.18															
Junior Eric	J WDH A : H		RT OT ST O	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00	8.00	40.00 8.00	43.170 64.609	1726.80 516.87	35.062	X U 825 E O	1682.05	2393.67	2243.67	142.33	482.63	78.53	703.49	1690.18															
Joseph Eric III	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	35.750	1430.00 0.00	26.280	X U 472 E O	1051.20	1430.00	1430.00	65.48	348.19	59.75	504.42	925.58															
Gilberto Guada	X J OEA A : H	1715- TPTUPH	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	46.670	1866.81 0.00	29.480	X U 825 E O	1179.20	1866.81	1866.81	148.22	388.89	65.94	542.45	1324.36															
Antonio Graza	X J LBJ A : H		RT OT ST O	8.00	4.00	8.00	8.00	8.00	8.00	35.00	35.750	1287.00 0.00	26.280	X U 472 E O	946.06	1430.00	1287.00	65.48	156.88	59.75	552.11	1077.89															
Rafael Groves	X J CPF A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	32.00	51.230	1639.04 0.00	29.113	X U 254 E O	931.63	1639.04	1639.04	101.62	268.23	163.50	533.75	1105.29															
Armando Gutierrez	J WDH A : H		RT OT ST O	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00	8.00	40.00 8.00	43.170 64.609	1726.80 516.87	35.062	X U 825 E O	1682.05	2393.67	2243.67	142.33	482.63	78.53	703.49	1690.18															

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor: Conli Enterprises, Inc.- EWR 154.183
 Address: 2045 LINCOLN HIGHWAY
 EIN #: _____
 Payroll #: 17
 Week Ending Date: 2015-07-04
 Project Name & Location: EWR154.183 Aviation Fuel Sys, Newark NJ
 PA Contract Number: 68950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid							
				28	29	30	1	2	3	4													
Charles Helcher	J WD A : H		RT OT ST O	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00	8.00	40.00 8.00	52.500 78.750	2100.00 590.00 0.00 98.56	63.520	X U 825 E O	3042.00	4246.00	4730.00	172.48	618.03	95.96	869.57	3359.13	
Norwood Hill	X J OEB A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	44.296	1767.92 0.00 0.00 62.59	29.480	X U 825 E O	1178.70	1787.02	1787.02	113.33	427.11	62.68	603.04	1184.66	
Timothy Houshan	X J LBS A : H		RT OT ST O	8.00 1.00	8.00 1.00	8.00	8.00	8.00		40.00 2.00	36.150 54.230	1446.00 105.46 0.00 847.79	26.280	X U 472 E O	1103.76	1554.40	1554.40	104.43	344.56	847.20	1290.28	258.18	
Carlos A. Lunego	X J LBJ A : H	1710 - SLAPN G	RT OT ST O	8.00 .50	8.00	8.00	8.00	8.00		40.00 .50	35.760 53.020	1430.00 26.61 0.00 60.72	26.280	X U 472 E O	1064.35	1456.81	1456.81	97.23	376.27	60.72	484.22	872.59	
Kevin Lemoye	X J LBJ A : H	1510 - XPHZNY	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	35.750	1430.00 0.00 0.00 59.75	26.280	X U 472 E O	1051.20	1430.00	1430.00	95.48	379.41	59.75	534.64	895.36	
Angel Llanos	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	35.760	1430.00 0.00 0.00 59.75	26.280	X U 472 E O	1051.20	1430.00	1430.00	95.48	390.33	59.75	545.56	884.44	
David Marconi	X J DEC A : H		RT OT ST O	3.00 2.50		6.00	7.00	8.00		21.00 2.00	43.427 63.860	911.97 127.72 0.00 72.63	30.762	X U 825 E O	707.52	2081.03	1039.63	132.61	349.24	72.63	553.08	1527.95	

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor: Confil Enterprises, Inc.- EWR 154.183
Address: 2045 LINCOLN HIGHWAY
EIN #:

Payroll #: 17
Week Ending Date: 2015-07-04
Project Name & Location: EWR 154.183 Aviation Fuel Sys, Newark NJ
PA Contract Number: 69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helpcr	3 SWAC or TWIC ID # if Issued	4 T J M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net	
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union Is checked)	Total Paid								
				28	29	30	1	2	3	4														
Christopher Masica	X J OEA A : H		RT OT ST O			8.00	8.00	8.00	8.00		32.00	456.78	1460.08 0.00 0.00 51.11	29.460	X U E O	825	1913.96	1460.08	1460.08	92.51	210.33	51.11	354.45	1105.63
John F McGuire	X J OEA A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	46.670 70.620	1866.80 35.31 0.00 65.57	29.662	X U E O	825	1201.32	1902.11	1902.11	120.40	353.51	66.57	540.54	1351.67
Kirk Pieleciacovo	X J LBJ A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	35.750	1430.01 0.00 0.00 59.75	26.280	X U E O	472	1051.20	1430.01	1430.01	95.48	257.85	59.75	413.08	1016.93
Jose Parfuciano	X J LBJ A : H	K10 ZUTKNU	RT OT ST O		8.00	8.00			8.00		24.00	35.750	852.00 0.00 0.00 61.69	26.280	X U E O	472	630.72	1493.62	858.00	93.97	499.65	61.69	570.31	613.31
Edward Riba	X J OEA A : H	1710 - USVFEN	RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	46.670	1866.80 0.00 0.00 65.34	29.480	X U E O	825	1179.20	1866.80	1866.80	118.22	338.48	65.34	522.04	1344.76
Manoel Soares	X J LBJ A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	35.750	1430.00 0.00 0.00 59.75	26.280	X U E O	472	1051.20	1430.00	1430.00	95.48	259.17	59.75	364.40	1055.60
Matthew Voorhees	X J OEA A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	46.670 68.110	1866.80 59.11 0.00 67.76	29.040	X U E O	825	1223.44	1935.91	1935.91	122.60	457.70	67.76	648.06	1287.85

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor Conti Enterprises, Inc. - EWR 154.183						Address 2045 LINCOLN HIGHWAY						EIN#											
Payroll # 17			Week Ending Date 2015-07-04			Project Name & Location EWR154.183 Aviation Fuel Sys. Newark NJ						PA Contract number 69950373											
1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid							
				28	29	30	1	2	3	4													
Ryan Wayne	J wd A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00	40.00 8.00	52.500 78.750	2100.00 530.00	63.520	X U E 825 O	3048.50	4246.00	2736.00	172.48	822.20	95.00	1050.24	3155.76	
Robert White	X J LBJ A : H	1810 - PIPGAF	RT OT ST O		8.00	8.00	8.00	8.00	8.00	40.00	35.600	1425.60 0.00 0.00 59.69	28.280	X U E 472 O	1651.20	1435.60	1435.60	95.82	202.20	99.69	557.91	1077.69	

Key:

RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
U - Union E - Employee O - Other
J - Journeyman A - Apprentice H - Helper

NOTE:

- All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
- Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
- Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

Sworn to before me, this day
10th of July, 2015

FALSIFICATION OF THIS STATEMENT IS A PUNISHABLE OFFENSE

Gina M Setzer
Notary Public
New Jersey
My Commission Expires 12-31-18

Brenda Davis certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Brenda Davis
Print Name Officer/Designee

Brenda Davis
Signature

[Signature]
Signature of Notary Public

7/10 20 15
DATE

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Mgr (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Cont Enterprises 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 Cont Enterprises 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 otherwise under this contract required to be submitted for the subject period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wages rates contained in any wage determination incorporated into the contract and that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

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 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 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 (CRAFT)

EXPLANATION

<u>EXCEPTION (CRAFT)</u>	<u>EXPLANATION</u>

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor or Subcontractor
 Robinson Aerial Surveys, Inc. Address One Edgeview Drive, Hackettstown, NJ 07840 EIN #

Payroll No. 13 For Week Ending June 28, 2015 Project & Location: PANYNJ, Newark Liberty Int'l Airport, Aviation Fuel System Modifications PA Contract Numbers EWR 154.183

1	2	3	4	5							6	7	8	9		11	12	13	14	15	16	17	18			
				Day and Date										Total Hrs	Base Hourly Rate of Pay									Total Base Pay	Supplemental Benefits	
				Mon	Tue	Wed	Thu	Fri	Sat	Sun															Hourly Rate	Paid to Local # if Union is circled
Brian P. McDermott	J Survey				8					8	46.07	368.56	29.48	0	29.48	368.56	368.56	28.19	29.48	7.37	65.04	303.52				
	A _____																									
	Class 1, 2 or 3																									
	J _____																									
	A _____																									
	Class 1, 2 or 3																									
	J _____																									
	A _____																									
	Class 1, 2 or 3																									
	J _____																									
	A _____																									
	Class 1, 2 or 3																									

AMY M. SCUDESE
 Commission # 2381305
 Notary Public, State of New Jersey
 My Commission Expires
 November 20, 2019

Key:
 RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

NOTE:
 1 All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report
 2 Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
 3 Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced

I, Carlos A. Medina, certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Carlos A. Medina 07/10/15
 Print Name Officer/Designee Signature Date

Sworn to before me, this day
 10th of July, 2015

[Signature]
 Signature of Notary Public



Statement of Compliance

I do hereby state:

1. That I, Carlos A. Medina (Name of Signatory), President (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Robinson Aerial Surveys, 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 Robinson Aerial Surveys, 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 otherwise under this contract required to be submitted for the subject period are correct and complete, that the wage rates for laborers or mechanics contained therein are not less than the applicable wages rates contained in any wage determination incorporated into the contract and that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

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 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 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 (CRAFT)

EXPLANATION

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor <input type="checkbox"/> or Subcontractor <input checked="" type="checkbox"/> Robinson Aerial Surveys, Inc.				Address One Edgeview Drive, Hackettstown, NJ 07840										EIN #														
Payroll No. 14		For Week Ending July 5, 2015			Project & Location: PANYNJ, Newark Liberty Int'l Airport, Aviation Fuel System Modifications										PA Contract Number EWR 154.183													
1	2	3	4	5							6	7	8	9	10	11	12	13	14	15	16	17	18					
				Day and Date																				Supplemental Benefits				
				Mon	Tue	Wed	Thu	Fri	Sat	Sun														Total Hrs	Base Hourly Rate of Pay	Total Base Pay	Hourly Rate	Paid to (local # if Union is divided)
29	30	1	2	3	4	5																						
Brian P. McDermott	① Survey A _____ Class 1, 2 or 3							8	46.07	368.56	29.48	0.825	235.84	368.56	368.56	28.19	29.48	7.37	65.04	303.62								
Brian P. McDermott	① Survey A _____ Class 1, 2 or 3				2.5			2.5	47.07	117.68	29.48	0.825	73.70	117.68	117.68	9.00	9.41	2.35	20.76	96.92								
	J _____ A _____ Class 1, 2 or 3																											
	J _____ A _____ Class 1, 2 or 3																											
	J _____ A _____ Class 1, 2 or 3																											

AMY A. SCUDER
Commission # 2391305
Notary Public, State of New Jersey
My Commission Expires
November 20, 2019

Key:
RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
U - Union E - Employee O - Other
J - Journeyman A - Apprentice H - Helper

Sworn to before me, this day
10th of July, 2015

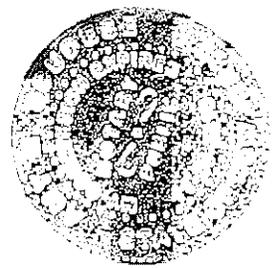
I, Carlos A. Medina certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense

Carlos A. Medina
Print Name Officer/Designee

Carlos A. Medina
Signature

07/10/15
Date

AMY A. SCUDER
Signature of Notary Public



NOTE:
1 All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report
2 Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
3 Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced

Statement of Compliance

I do hereby state:

1. That I, Carlos A. Medina (Name of Signatory), President (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Robinson Aerial Surveys, 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 Robinson Aerial Surveys, 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 otherwise under this contract required to be submitted for the subject period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wages rates contained in any wage determination incorporated into the contract and that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

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 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 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 (CRAFT)

EXPLANATION

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

ATLAS CONCRETE CORP. (SUBCONTRACTOR)

40 BRUNSWICK AVE. SUITE 201 EDISON, NJ 08817

1 Payroll #2	2 W/E 6/6/15	3 EWR-154.183 NEWARK AIRPORT	4 EWR-154.183	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Rate Pay	9 Hourly Rate	10 Supplemental Benefits		12 Gross Amount Earned	13 Terrible Gross Wages	14 FICA	15 Withholding Tax	16 Other	17 Total Deductions	18 Net	
				Day and Date											Total Paid	Total Paid								
				Mon	Tue	Wed	Thu	Fri	Sat	Sun														U
ALCIDES CAPELA	OPERATOR CLASS B Class 1, 2 or 3			Mon	8	Tue	8	Wed	8	Thu	8	40	44.48	1979.36	29.48	U								
				Fri		Sat		Sun		2														
				Total																				
												\$1,267.64	\$3,247.00	1579.36	149.61	340.98	66.94	557.53	1355.11					
ANGEL CARCHIPULA SUQUI	LABORER JOURNEYMAN Class 1, 2 or 3			Mon	4	Tue		Wed	8	Thu	8	28	35.75	1108.26	26.28	U								
				Fri		Sat		Sun		2														
				Total																				
												788.4	1896.66	1108.26	91.09	255.85	45.71	392.65	715.6					
ALBERTO DUARTE	LABORER JOURNEYMAN Class 1, 2 or 3			Mon	4	Tue		Wed	8	Thu	8	28	35.75	1108.26	26.28	U								
				Fri		Sat		Sun		2														
				Total																				
												788.4	1896.66	1108.26	91.09	120.44	45.71	257.24	851.01					
JOSE J ARGUETA	LABORER JOURNEYMAN Class 1, 2 or 3			Mon	4	Tue		Wed	8	Thu	8	28	35.75	1108.26	26.28	U								
				Fri		Sat		Sun		2														
				Total																				
												788.4	1896.66	1108.26	91.09	255.85	45.71	392.65	715.6					
ANGEL B VERDUGO	LABORER JOURNEYMAN Class 1, 2 or 3			Mon	4	Tue		Wed	8	Thu	8	28	35.75	1108.26	26.28	U								
				Fri		Sat		Sun		2														
				Total																				
												788.4	1896.66	1108.26	91.09	169.67	45.71	305.47	802.78					

KEY:
 RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

NOTE:
 1. All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
 2. Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
 3. Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

I, Maria E. Amorim certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Maria E. Amorim Maria E. Amorim 7/14/15
 Print Name Officer/Designee Signature Date

Signed to before me, this day
14th of July, 2015
KATHLEEN NELSON
 Notary Public, State of New Jersey
 ID# 2387475
 My Commission Expires July 21, 2019

Kathleen Nelson
 Signature of Notary Public

Statement of Compliance

I do hereby state:

1. That I, Marie E. Anorim (Name of Signatory), President (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Atlas Concrete Corp. (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 Atlas Concrete Corp. (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 otherwise under this contract required to be submitted for the subject period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wages rates contained in any wage determination incorporated into the contract and that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

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 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 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 (CRAFT)

EXPLANATION

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

ATLAS CONCRETE CORP. (SUBCONTRACTOR)

40 BRUNSWICK AVE. SUITE 201 EDISON, NJ 08817

1 Employee Name, Address, and SS. No. (Last 4 digits)	2 Job Title & Code Work Classification (Journeyman or Apprentice / Class 1,2,3)	3 SWAC or TWIC ID # B Unrec	4 Time Code	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Hourly Rate	10 Supplemental Benefits		12 Gross Amt. Earned	13 Taxable Gross Wages	14 FICA	15 With- holding Tax	16 Other	17 Total Deductions	18 Net
				Mon 8-Jun	Tue 9-Jun	Wed 10-Jun	Thu 11-Jun	Fri 12-Jun	Sat 13-Jun	Sun 14-Jun					Paid to (Social # if Union is deducted)	Total Paid							
JOSE L FLORES	LABORER		K							8	36.7	321.13	26.28	U									
	JOURNEYMAN		O							0.5				E									
			S											O									
	Class 1, 2 or 3		T													\$228.38	\$544.51	321.13	25.89	91.66	19.15	130.67	190.46
ANGEL CARCHIPULLA SUQUI	LABORER		K							8	35.75	312.82	26.28	U									
	JOURNEYMAN		O							0.5				E									
			S											O									
	Class 1, 2 or 3		T													223.38	536.2	312.82	25.25	88.52	12.92	126.69	186.12
ARTHUR ESTEVES	LABORER		K							4	35.75	143	26.28	U									
	JOURNEYMAN		O											E									
			S											O									
	Class 1, 2 or 3		T													105.12	248.12	143	11.78	2.91	5.98	20.67	122.33
JOSE / ARGUETA	LABORER		K							8	35.75	598.82	26.28	U									
	JOURNEYMAN		O							0.5				E									
			S											O									
	Class 1, 2 or 3		T													433.62	1032.44	598.82	49.78	97.01	24.87	171.16	427.65
	LABORER		K											U									
	JOURNEYMAN		O											E									
			S											O									
	Class 1, 2 or 3		T																				

Key:
 RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

NOTE:
 1. All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
 2. Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
 3. Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

I, Maria E Amorim, certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Maria E Amorim
 Print Name Officer/Designer

Maria E Amorim
 Signature

7/14/15
 Date

Sworn to before me, this day
14th of July, 2015
KATHLEEN NELSON
 Notary Public, State of New Jersey
 ID# 2387475
 My Commission Expires July 21, 2019
Kathleen Nelson
 Signature of Notary Public

Statement of Compliance

I do hereby state:

1. That I, Marie E. Amorim (Name of Signatory), President (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Atlas Concrete Corp. (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 Atlas Concrete Corp. (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 otherwise under this contract required to be submitted for the subject period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wages rates contained in any wage determination incorporated into the contract and that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

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 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 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 (CRAFT)

EXPLANATION

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

ATLAS CONCRETE CORP. (SUBCONTRACTOR)

40 BRUNSWICK AVE, SUITE 201 EDISON, NJ 08817

1 Employee Name, Address, and SS. No. (last 4 digits)	2 Job Trade & Circle Work Classification (Assignment or Apprentice / Class 1, 2, 3)	3 SWAC or TWSE ID # if listed	4 Time	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt. Formed	13 Taxes & Gross Wages	14 FICA	15 With- holding Tax	16 Other	17 Total Deductions	18 Net
				Mon	Tue	Wed	Thu	Fri	Sat	Sun				Holiday	Ret'd to (Local or Union if shield)	Total Paid							
				22-Jun	23-Jun	24-Jun	25-Jun	26-Jun	27-Jun	28-Jun													
GENDRI ORTEGA	LABORER JOURNEYMAN Class 1, 2 or 3		8							8	35.75	286	26.28	U									
																	\$210.24	\$496.24	286	23.52	30.29	11.95	65.76
JOAQUIM RAMOS	LABORER JOURNEYMAN Class 1, 2 or 3		2.5							2.5	35.75	420.08	26.28	U									
																	275.04	696.02	420.058	34.34	38.85	16.8	89.99
PAULO SILVA	LABORER JOURNEYMAN Class 1, 2 or 3		1							1	35.75	339.63	26.28	U									
																	236.52	576.15	339.63	27.77	66.74	13.89	108.4
	LABORER JOURNEYMAN Class 1, 2 or 3													U									
																	275.04	696.02	420.08				

KEY:
 RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

NOTE:
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I, Maria E. Amorim certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Maria E. Amorim Maria E. Amorim 7/14/15
 Print Name Officer/Designee Signature Date

Sworn to before me, this day
14th of July, 2015
KATHLEEN NELSON
 Notary Public, State of New Jersey
 ID# 2387475
 My Commission Expires July 21, 2019
Kathleen Nelson
 Signature of Notary Public

Statement of Compliance

I do hereby state:

1. That I, Marie E. Amorim (Name of Signatory), President (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Atlas Concrete Corp. (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 Atlas Concrete Corp. (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 otherwise under this contract required to be submitted for the subject period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wages rates contained in any wage determination incorporated into the contract and that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

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c. **EXCEPTIONS:**

EXCEPTION (CRAFT)

EXPLANATION

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor
Conti Enterprises, Inc.- EWR 154.183

Address
2045 LINCOLN HIGHWAY

FIN #

Payroll #
17

Week Ending Date
2015-07-04

Project Name & Location
EWR154.183 Aviation Fuel Sys, Newark NJ

PA Contract Number
69950373

1	2	3	4	5							6	7	8	9			10	11	12	13	14	15	16	17	18
Name Address Last Four Digits of Social Security Number	List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	SWAC or TWIC ID # If issued	T I M E	Day and Date							Total Hrs	Base Hourly Rate of Pay	Total Base Pay	Supplemental Benefits			Gross Amt Earned	Taxable Gross Wages	FICA	With- holding tax	Other	Total Deductions	Net		
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid									
				28	29	30	1	2	3	4															
Albert Patrick Andrews	J WDH A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00	40.00 8.00	43.170 64.609	1726.80 516.87	35.062	X U E O	325	1682.96	2393.67	2243.67	142.33	482.63	78.53	703.49	1690.18		
Junior Ellis	J WDH A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00	40.00 8.00	43.170 64.609	1726.80 516.87	35.062	X U E O	325	1682.96	2393.67	2243.67	142.33	618.32	78.53	839.18	1554.49		
Joseph Erie III	X J LBJ A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00	40.00	35.750	1430.00 0.00	28.280	X U E O	472	1051.20	1430.00	1430.00	95.48	349.19	59.75	504.42	925.58		
Gabardo Gada	X J OEA A : H	1715- TPT UPH	RT OT ST O		8.00	8.00	8.00	8.00	8.00	40.00	40.670	1866.81 0.00	29.480	X U E O	325	1179.20	1866.81	1866.81	118.22	358.89	65.34	542.45	1324.36		
Antonio Graca	X J LBJ A : H		RT OT ST O		8.00	4.00	8.00	8.00	8.00	36.00	35.750	1287.00 0.00	28.280	X U E O	472	946.08	1430.00	1287.00	95.48	188.88	59.75	352.11	1077.89		
Klint Groves	X J CPF A : H		RT OT ST O		8.00	8.00	8.00	8.00		32.00	51.220	1639.04 0.00	29.113	X U E O	254	931.63	1639.04	1639.04	101.62	289.23	183.90	533.75	1105.29		
Amando Guilemez	J WDH A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00	40.00 8.00	43.170 64.609	1726.80 516.87	35.062	X U E O	325	1682.96	2393.67	2243.67	142.33	482.63	78.53	703.49	1690.18		

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor
Conti Enterprises, Inc.- EWR 154.183

Address
2045 LINCOLN HIGHWAY

F.I.N.#

Payroll #
17

Week Ending Date
2015-07-04

Project Name & Location
EWR154.183 Aviation Fuel Sys, Newark NJ

PA Contract Number
69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYSDOL REGISTERED) Helper	3 SWAC or TWIC ID # (if Issued)	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid							
				28	29	30	1	2	3	4													
Charles Hatcher	J WD A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00		40.00 8.00	52.500 78.750	2100.00 630.00 0.00 95.56	63.520	X U E O	825 3048.96	4246.00	2700.00	172.48	618.53	95.56	886.87	3359.13
Norwood Hill	X J OEB A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	44.658	1787.92 0.00 0.00 62.56	29.480	X U E O	825 1179.20	1787.92	1787.92	113.33	427.13	62.56	609.04	1184.88
Timothy Houlhan	X J LBS A : H		RT OT ST O		8.00 1.00	8.00 1.00	8.00	8.00	8.00		40.00 2.00	36.150 64.230	1446.00 105.46 0.00 847.29	26.280	X U E O	472 1103.76	1554.46	1554.46	104.43	341.56	847.29	1286.28	258.18
Carlos A. Lamego	X J LBJ A : H	1710 SLA PWG	RT OT ST O		8.00 .50	8.00	8.00	8.00	8.00		40.00 .50	35.760 53.620	1430.00 26.81 0.00 60.72	26.280	X U E O	472 1034.36	1456.81	1456.81	97.23	326.27	60.72	464.22	972.59
Kevin Lamego	X J LBJ A : H	1510 XFM ZMY	RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	35.750	1430.00 0.00 0.00 59.75	26.280	X U E O	472 1051.20	1430.00	1430.00	95.48	379.41	59.75	534.64	895.36
Angel Laureano	X J LBJ A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	35.750	1430.00 0.00 0.00 59.75	26.280	X U E O	472 1051.20	1430.00	1430.00	95.48	390.33	59.75	545.68	884.44
David Marconi	X J DEC A : H		RT OT ST O		3.00 2.00		6.00	4.00	8.00		21.00 2.00	43.427 63.860	911.97 127.72 0.00 72.83	30.762	X U E O	825 707.62	2081.03	1039.66	132.01	548.24	72.83	953.08	1527.85

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor: Conti Enterprises, Inc.- EWR 154.183
 Address: 2045 LINCOLN HIGHWAY
 EIN #:

Payroll #: 17
 Week Ending Date: 2015-07-04
 Project Name & Location: EWR154.183 Aviation Fuel Sys, Newark NJ
 PA Contract Number: 69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # If Union Is checked)	Total Paid							
				28	29	30	1	2	3	4													
Christopher Masica	X J OEA A : H		RT OT ST O			8.00	8.00	8.00	8.00		32.00	45,820	1,460.08 0.00 61.11	29.490	X U 825 E O	943.36	1,460.08	1,460.08	92.91	210.83	51.11	354.45	1,105.63
John F McGuire	X J OEA A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00 .50	48,670 70,620	1,866.80 85.31 68.57	29.662	X U 825 E O	1,201.32	1,902.11	1,902.11	120.46	353.91	66.57	640.54	1,381.57
Nick Platolacovo	X J LBJ A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	35,790	1,430.01 0.00 59.75	28.280	X U 472 E O	1,051.20	1,430.01	1,430.01	95.48	257.85	59.75	413.08	1,016.03
Jose Purificacao	X J LBJ A : H	1810 ZUT KNU	RT OT ST O		8.00	8.00			8.00		24.00	35,790	858.00 0.00 61.89	26.280	X U 472 E O	636.72	1,483.62	858.00	98.97	408.65	61.89	570.31	913.31
Edward Ribeiro	X J OEA A : H	1710 USV FCN	RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	48,670	1,866.80 0.00 65.34	29.460	X U 825 E O	1,179.20	1,866.60	1,866.60	118.22	338.48	65.34	522.04	1,344.76
Manuel Soares	X J LBJ A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	35,790	1,430.00 0.00 59.75	28.280	X U 472 E O	1,051.20	1,430.00	1,430.00	95.48	208.17	59.75	364.40	1,065.60
Matthew Voorhees	X J OEA A : H		RT OT ST O		8.00 1.00	8.00	8.00	8.00	8.00		40.00 1.00	46,670 89,110	1,866.80 68.11 67.76	29.940	X U 825 E O	1,223.44	1,935.91	1,935.91	122.60	457.70	67.76	648.06	1,287.85

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor Conti Enterprises, Inc.- EWR 154.183						Address 2045 LINCOLN HIGHWAY						FIN#											
Payroll # 17			Week Ending Date 2015-07-04			Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ						PA Contract Number 69950373											
1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification: Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid							
				28	29	30	1	2	3	4													
Bryan Wayne	J WD A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00		40.00 8.00	52.800 78.750	2100.00 630.00 0.00 95.58	63.520 X U E O	3048.95	4245.00	2730.00	172.48	822.20	95.58	1090.24	3155.76	
Robert White	X J LBJ A : H	1810 PIP GAF	RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	35.890	1435.60 0.00 0.00 59.89	26.280 X U E O	1051.20	1435.60	1435.60	95.62	202.20	69.89	357.91	1077.69	

Key:
 RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

NOTE:
 1. All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
 2. Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
 3. Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

Sworn to before me, this day
10th of July, 2015

FALSIFICATION OF THIS STATEMENT IS A PUNISHABLE OFFENSE

Gina M Setzer
 Notary Public
 New Jersey
 My Commission Expires 12-31-18

Brenda Davis certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Brenda Davis
Print Name Officer/Designee

Brenda Davis
Signature

[Signature]
Signature of Notary Public

7/10, 2015
DATE

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Mgr (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Conti Enterprises 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 Conti Enterprises 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 otherwise under this contract required to be submitted for the subject period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wages rates contained in any wage determination incorporated into the contract and that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

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 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 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 (CRAFT)

EXPLANATION

<u>EXCEPTION (CRAFT)</u>	<u>EXPLANATION</u>

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor
Conti Enterprises, Inc.- EWR 154.183

Address
2045 LINCOLN HIGHWAY

EIN #

Payroll #
17

Week Ending Date
2015-07-04

Project Name & Location
EWR154.183 Aviation Fuel Sys, Newark NJ

PA Contract Number
69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DCL REGISTERED) Halper	3 SWAC or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			11 Gross Amt Earned	12 Taxable Gross Wages	13 FICA	14 With- holding tax	15 Other	16 Total Deductions	17 Not	18
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid								
				28	29	30	1	2	3	4														
Albert Patrick Andrews	J WDH A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00	40.00 8.00	43.170 64.609	1726.80 516.07 0.00 78.53	35.062	X U 325 E O	1682.96	2393.67	2243.67	142.33	482.63	78.53	703.49	1690.18		
Junior Ellis	J WDH A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00	40.00 8.00	43.170 64.609	1726.80 516.07 0.00 78.53	35.062	X U 325 E O	1682.96	2393.67	2243.67	142.33	818.32	78.53	839.18	1554.49		
Joseph Erle III	X J LBJ A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00	40.00	35.750	1430.00 0.00 0.00 59.75	28.280	X U 472 E O	1051.20	1430.00	1430.00	85.46	349.19	59.75	504.42	925.58		
Gilberto Geadu	X J OEA A : H	1715- TPT UPH	RT OT ST O		8.00	8.00	8.00	8.00	8.00	40.00	46.870	1866.81 0.00 0.00 65.34	29.480	X U 325 E O	1179.20	1866.81	1866.81	118.22	358.89	65.34	542.45	1324.39		
Antonio Graca	X J LBJ A : H		RT OT ST O		8.00	4.00	8.00	8.00	8.00	36.00	35.750	1287.00 0.00 0.00 59.75	26.280	X U 472 E O	948.08	1430.00	1287.00	95.48	196.88	59.75	352.11	1077.89		
Klint Graves	X J CPF A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00	32.00	51.220	1639.04 0.00 0.00 163.00	28.113	X U 254 E O	331.53	1639.04	1639.04	101.62	268.23	183.00	533.75	1105.29		
Armando Gutierrez	J WDH A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00	40.00 8.00	43.170 64.609	1726.80 516.07 0.00 78.53	35.062	X U 325 E O	1682.96	2393.67	2243.67	142.33	482.63	78.53	703.49	1690.18		

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor
Conti Enterprises, Inc.- EWR 154.183

Address
2045 LINCOLN HIGHWAY

EIN#

Payroll #
17

Week Ending Date
2015-07-04

Project Name & Location
EWR154.183 Aviation Fuel Sys, Newark NJ

PA Contract Number
69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID #/ # Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # If Union Is checked)	Total Paid							
				28	29	30	1	2	3	4													
Charles Hatcher	J WD A : H		RT OT ST O	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	40.00 8.00	52.500 78.750	2100.00 630.00 0.00 95.56	63.520	X U 825 E O	3048.96	4248.00	2730.00	172.48	618.83	95.56	896.87	3359.13		
Nonwood Hill	X J OEB A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	40.00	44.698	1787.92 0.00 0.00 62.58	29.480	X U 625 E O	1173.20	1787.92	1787.92	113.33	427.13	62.58	603.04	1184.88		
Timothy Houlihan	X J LBS A : H		RT OT ST O	8.00 1.00	8.00 1.00	8.00	8.00	8.00	40.00 2.00	36.180 54.230	1446.00 106.46 0.00 847.29	28.280	X U 472 E O	1103.76	1554.46	1554.46	104.43	344.56	847.29	1296.28	258.18		
Carlos A. Lamego	X J LBJ A : H	1710 SLA PWG	RT OT ST O	8.00 .50	8.00	8.00	8.00	8.00	40.00 .50	35.750 59.520	1430.00 28.21 0.00 60.72	28.280	X U 472 E O	1064.36	1456.81	1456.81	97.23	326.27	60.72	464.22	972.59		
Kevin Lamego	X J LBJ A : H	1510 XFM ZMY	RT OT ST O	8.00	8.00	8.00	8.00	8.00	40.00	35.750	1430.00 0.00 0.00 59.76	28.280	X U 472 E O	1051.20	1430.00	1430.00	95.48	379.41	59.76	634.64	895.36		
Angel Laureano	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	40.00	35.750	1430.00 0.00 0.00 59.75	28.280	X U 472 E O	1051.20	1430.00	1430.00	95.48	396.35	59.76	645.66	884.44		
David Marconi	X J OEC A : H		RT OT ST O	3.00 2.00		6.00	4.00	8.00	21.00 2.00	43.427 63.860	911.97 127.72 0.00 72.83	30.762	X U 825 E O	707.62	2081.03	1039.69	132.01	348.24	72.83	553.08	1527.95		

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor: Conti Enterprises, Inc.- EWR 154.183
 Address: 2045 LINCOLN HIGHWAY
 EIN#:

Payroll #: 17
 Week Ending Date: 2015-07-04
 Project Name & Location: EWR154.183 Aviation Fuel Sys, Newark NJ
 PA Contract Number: 69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # if issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid							
				28	29	30	1	2	3	4													
Christopher Masica	X J OEA A : H		RT OT ST O		8.00	8.00	8.00	8.00		32.00	45,828	1460.08 0.00 51.11	X U 825 E O	843.35	1460.08	1460.08	92.51	210.83	51.11	354.45	1105.63		
John F McGuire	X J OEA A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	46,670	1866.80 35.31 66.57	X U 825 E O	1201.32	1802.11	1802.11	120.46	353.51	66.57	540.54	1361.57		
Nick Pirololacovo	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	35,760	1430.01 0.00 69.75	X U 472 E O	1651.20	1430.01	1430.01	95.46	257.85	69.75	413.08	1016.93		
Jose Purificacio	X J LBJ A : H	1810 ZUT KNU	RT OT ST O	8.00	8.00			8.00		24.00	35,760	858.00 0.00 61.69	X U 472 E O	650.72	1483.62	658.00	95.97	409.65	61.69	570.31	913.31		
Edward Rino	X J OEA A : H	1710 USV FCN	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	46,670	1866.80 0.00 65.34	X U 825 E O	1179.20	1866.80	1866.80	110.22	336.46	65.34	522.04	1344.76		
Manuel Soares	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	35,760	1430.00 0.00 69.75	X U 472 E O	1051.20	1430.00	1430.00	95.46	208.17	69.75	364.40	1065.60		
Matthew Voorhees	X J OEA A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	46,670	1866.80 69.11 67.78	X U 825 E O	1223.44	1935.91	1935.91	122.60	457.70	67.78	648.06	1287.85		

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor: Conti Enterprises, Inc.- EWR 154.183
Address: 2045 LINCOLN HIGHWAY
IN.#

Payroll # 17
Week Ending Date 2015-07-04
Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ
PA Contract Number 69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # If Union Is checked)	Total Paid							
				28	29	30	1	2	3	4													
Bryan Wayne	J WD A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00	40.00 8.00	62.600 78.760	2109.00 630.00	63.520	X U 325 E O	3048.96	4246.00	2730.00	172.48	622.20	95.58	1090.24	3155.76	
Robert White	X J LBJ A : H	1810 PIP GAF	RT OT ST O		8.00	8.00	8.00	8.00	8.00	40.00	35.690	1435.60 0.00	28.280	X U 472 E O	1051.20	1435.60	1436.60	95.82	202.20	99.89	357.91	1077.69	

Key:
RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
U - Union E - Employee O - Other
J - Journeyman A - Apprentice H - Helper

NOTE:
1. All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
2. Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
3. Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

Sworn to before me, this day
10th of July, 2015

FALSIFICATION OF THIS STATEMENT IS A PUNISHABLE OFFENSE

Gina M Setzer
Notary Public
New Jersey
My Commission Expires 12-31-18

I, Brenda Davis certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Brenda Davis
Print Name Officer/Designee

Brenda Davis
Signature

[Signature]
Signature of Notary Public

7/10, 2015
DATE

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Mgr (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Conti Enterprises 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 Conti Enterprises 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 otherwise under this contract required to be submitted for the subject period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wages rates contained in any wage determination incorporated into the contract and that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

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 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 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 (CRAFT)

EXPLANATION

<u>EXCEPTION (CRAFT)</u>	<u>EXPLANATION</u>

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor: Conti Enterprises, Inc.- EWR 154.183
Address: 2045 LINCOLN HIGHWAY
EIN#:

Payroll #: 18
Week Ending Date: 2015-07-11
Project Name & Location: EWR154.183 Aviation Fuel Sys, Newark NJ
PA Contract Number: 69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # If Union is checked)	Total Paid							
				5	6	7	8	9	10	11													
Kevin Abreu	X J OEB A : H		RT OT ST O	8.00	8.00	8.00				24.00	45.480	1091.52 0.00 0.00 38.21	28.480	X U 825 E O	707.52	1091.52	1091.52	69.16	207.25	38.21	314.62	776.90	
Albert Patrick Andrews	J WDH A : H		RT OT ST O	8.00 3.00	8.00 3.00	8.00 2.00	8.00 2.00	8.00		40.00 10.00	43.570 65.360	1742.60 653.60 0.00 83.87	35.428	X U 825 E O	1771.40	2546.40	2396.40	151.99	534.49	83.87	770.35	1776.05	
Lance H Dal Nero	X J OEA A : H		RT OT ST O	8.00						8.00	47.070	376.56 0.00 0.00 65.01	28.480	X U 825 E O	235.84	1657.37	376.56	117.63	601.04	65.01	633.98	1173.39	
Junior Elle	J WDH A : H		RT OT ST O	8.00 3.00	8.00 3.00	8.00 2.00	8.00 2.00	8.00		40.00 10.00	43.570 65.360	1742.60 653.60 0.00 83.87	35.428	X U 825 E O	1771.40	2546.40	2396.40	151.99	514.10	83.87	749.96	1798.44	
Joseph Ertle III	X J LBJ A : H		RT OT ST O	8.00 .50	8.00	8.00	8.00	8.00		40.00 .50	35.750 53.620	1430.01 28.81 0.00 60.72	26.280	X U 472 E O	1084.36	1496.82	1456.82	97.23	358.84	60.72	516.78	940.03	
Gilberto Garcia	X J OEA A : H	1715 TPT UPH	RT OT ST O	8.00 1.00	8.00	8.00	8.00	8.00		40.00 1.00	47.070 70.610	1882.81 70.51 0.00 68.37	29.840	X U 825 E O	1223.44	1953.42	1953.42	123.69	397.57	88.37	579.63	1373.79	
Antonio Garcia	X J LBJ A : H		RT OT ST O	8.00 1.00	8.00	8.00 1.00	8.00	8.00		40.00 2.00	35.750 58.830	1430.01 107.26 0.00 63.63	26.280	X U 472 E O	1103.76	1537.27	1537.27	102.48	220.65	63.63	388.76	1150.51	

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor: Conti Enterprises, Inc. - EWR 154.183
Address: 2045 LINCOLN HIGHWAY
EIN #

Payroll #: 18
Week Ending Date: 2015-07-11
Project Name & Location: EWR154.183 Aviation Fuel Sys, Newark NJ
PA Contract Number: 69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # if issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid							
				5	6	7	8	9	10	11													
David Marconi	X J DEC A : H		RT OT ST O		5.00 1.00	8.00 .50	8.00	8.00			29.00 1.50	43.570 65.360	1263.54 98.04	30.207	X U 825 E O	921.30	2233.02	1381.58	141.83	489.23	78.16	718.02	1614.00
Christopher Masica	X J OEA A : H		RT OT ST O			8.00	8.00 1.00	8.00	8.00		32.00 1.00	48.275 70.620	1460.80 70.62	28.927	X U 825 E O	967.60	1935.86	1651.42	122.60	335.60	67.76	526.16	1409.82
Nick Piotracove	X J LBJ A : H		RT OT ST O		8.00	8.00	8.00				24.00	35.750	858.00 0.00	26.280	X U 472 E O	630.72	1761.75	858.00	116.45	353.09	71.39	540.93	1210.82
Jose Purificacao	X J LBJ A : H	1810 ZUT KNU	RT OT ST O			8.00	8.00 1.00	8.00	8.00		32.00 1.00	35.750 53.630	1144.01 83.63	26.280	X U 472 E O	667.24	1483.64	1197.64	96.98	397.53	61.69	558.60	925.04
Edward Riho	X J OEA A : H	1710 USV FCN	RT OT ST O		8.00 1.00	8.00	8.00	8.00	8.00		40.00 1.00	47.070 70.610	1882.81 70.61	29.840	X U 825 E O	1223.44	1953.42	1953.42	123.69	367.15	68.37	559.21	1384.21
Manuel Soares	X J LBJ A : H		RT OT ST O		8.00	8.00	8.00 1.00				24.00 1.00	35.750 53.630	858.00 83.63	26.282	X U 472 E O	657.04	1483.64	911.63	98.98	220.65	61.69	381.33	1102.31
Matthew Voorhees	X J OEA A : H		RT OT ST O		8.00 2.00	8.00 3.00	8.00 2.00	8.00 2.00	8.00		40.00 9.00	47.070 70.610	1882.80 836.49	32.188	X U 825 E O	1577.20	2518.28	2518.28	159.45	675.31	88.14	922.90	1595.38

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor Conti Enterprises, Inc. - EWR 154.183						Address 2045 LINCOLN HIGHWAY						EIN#											
Payroll # 18			Week Ending Date 2015-07-11			Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ						PA Contract Number 69950373											
1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid							
				5	6	7	8	9	10	11													
Bryan Wayne	J WD A : H		RT OT ST O	8.00 3.00	8.00 3.00	8.00 2.00	8.00 2.00	8.00		40.00 10.00	52.500 78.750	2100.00 787.50 0.00 101.07	63.428 <input checked="" type="checkbox"/> U 025 <input type="checkbox"/> E <input type="checkbox"/> O	3171.40	4437.50	2887.50	182.44	881.92	101.07	1165.43	3272.07		
Robert White	<input checked="" type="checkbox"/> J LBJ A : H	1810 PIP GAF	RT OT ST O	8.00 1.00	8.00	8.00	8.00	8.00		40.00 1.00	35.890 53.630	1435.60 53.63 0.00 61.63	26.260 <input checked="" type="checkbox"/> U 472 <input type="checkbox"/> E <input type="checkbox"/> O	1077.48	1489.23	1489.23	99.23	209.49	61.63	370.65	1118.68		

Key:

RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
U - Union E - Employee O - Other
J - Journeyman A - Apprentice H - Helper

NOTE:

- All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
- Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
- Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

Sworn to before me, this day
15th of July, 2015

FALSIFICATION OF THIS STATEMENT IS A PUNISHABLE OFFENSE

Elizabeth Russo
Notary Public of New Jersey
ID# 2362950
My Commission Expires 8/6/2017

Elizabeth Russo

Brenda Davis certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Brenda Davis
Print Name Officer/Designee

Brenda Davis
Signature

Elizabeth Puno
Signature of Notary Public

7-15 20 15
DATE

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Mgr (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Conti Enterprises, 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 Conti Enterprises, 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 otherwise under this contract required to be submitted for the subject period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wages rates contained in any wage determination incorporated into the contract and that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

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 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 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 (CRAFT)

EXPLANATION

<u>EXCEPTION (CRAFT)</u>	<u>EXPLANATION</u>

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor
Conti Enterprises, Inc. - EWR 154.183

Address
2045 LINCOLN HIGHWAY

EIN #

Payroll #
18

Week Ending Date
2015-07-11

Project Name & Location
EWR154.183 Aviation Fuel Sys, Newark NJ

PA Contract Number
69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E RT OT ST O	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union Is checked)	Total Paid							
				5	6	7	8	9	10	11													
Kevin Abreu	X J OEB A : H		RT OT ST O	8.00	8.00	8.00				24.00	46.480	1091.62 0.00 0.00 38.21	29.480	X U E 825 O	707.62	1091.52	1091.32	69.16	207.25	38.21	314.62	776.90	
Albert Patrick Andrews	J WDH A : H		RT OT ST O	8.00 3.00	8.00 3.00	8.00 2.00	8.00 2.00	8.00		40.00 10.00	43.570 65.360	1742.80 653.60 0.00 83.67	35.428	X U E 825 O	1771.40	2546.40	2396.40	151.99	504.49	83.87	770.35	1776.05	
Lance H Del Nero	X J OEA A : H		RT OT ST O	8.00						8.00	47.070	376.56 0.00 0.00 65.01	29.460	X U E 825 O	235.04	1867.37	376.56	117.63	601.34	65.01	583.96	1179.39	
Junior Elio	J WDH A : H		RT OT ST O	8.00 3.00	8.00 3.00	8.00 2.00	8.00 2.00	8.00		40.00 10.00	43.570 65.360	1742.80 653.60 0.00 83.67	35.428	X U E 825 O	1771.40	2546.40	2396.40	151.99	514.10	83.87	749.96	1786.44	
Joseph Ertio III	X J LBJ A : H		RT OT ST O	8.00 .50	8.00	8.00	8.00	8.00		40.00 .50	35.750 53.620	1430.01 28.81 0.00 80.72	26.280	X U E 472 O	1064.58	1466.82	1466.82	97.23	369.84	60.72	516.79	940.03	
Gilberto Geada	X J OEA A : H	1715 TPT UPH	RT OT ST O	8.00 1.00	8.00	8.00	8.00	8.00		40.00 1.00	47.070 70.610	1882.81 70.61 0.00 66.37	29.640	X U E 825 O	1223.44	1953.42	1953.42	123.69	387.57	66.37	570.63	1373.79	
Antonio Graca	X J LBJ A : H		RT OT ST O	8.00 1.00	8.00	8.00 1.00	8.00	8.00		40.00 2.00	35.750 53.630	1430.01 107.26 0.00 63.63	26.280	X U E 472 O	1103.76	1537.27	1537.27	102.48	226.65	63.63	388.76	1160.51	

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor: Conti Enterprises, Inc.- EWR 154.183
Address: 2045 LINCOLN HIGHWAY
FIN #:

Payroll #: 18
Week Ending Date: 2015-07-11
Project Name & Location: EWR154.183 Aviation Fuel Sys, Newark NJ
PA Contract Number: 69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid							
				5	6	7	8	9	10	11													
Klint Groves	X J CPF A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00 1.00	51.220 76.830	2048.80 76.83	28.468	X U 254 E O	1207.88	2126.63	2126.63	131.79	426.98	212.57	770.34	1055.29	
Armando Gutierrez	J WDH A : H		RT OT ST O	8.00 3.00	8.00 3.00	8.00 2.00	8.00 2.00	8.00		40.00 10.00	43.570 65.360	1742.80 653.60	35.428	X U 825 E O	1771.40	2546.40	2396.40	151.89	534.49	63.57	770.35	1776.05	
Charles Hatcher	J WD A : H		RT OT ST O	8.00 3.00	8.00 3.00	8.00 2.00	8.00 2.00	8.00		40.00 10.00	52.500 78.760	2100.00 787.60	65.428	X U 825 E O	3171.40	4437.50	2887.50	182.44	671.31	101.07	954.82	3482.68	
Timothy Houghen	X J LBS A : H		RT OT ST O	8.00 1.00	8.00	8.00 1.00	8.00	8.00		40.00 2.00	38.150 54.230	1446.00 105.46	26.280	X U 472 E O	1103.76	1654.46	1554.46	104.43	344.57	847.29	1296.29	298.17	
Carlos A. Lamago	X J LBJ A : H	1710 SLA PWG	RT OT ST O	8.00 1.00	8.00					16.00 1.00	35.750 59.630	572.00 63.63	26.280	X U 472 E O	446.76	2556.13	625.63	168.88	733.96	100.60	1003.34	1652.79	
Kevin Lamago	X J LBJ A : H	1510 XFM ZMY	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	35.750	1430.01 0.00	26.280	X U 472 E O	1051.20	1430.01	1430.01	95.48	373.58	59.75	533.81	896.20	
Angel Laureano	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00 3.00	8.00 2.00	8.00		40.00 5.00	35.750 59.626	1430.00 268.13	26.280	X U 472 E O	1162.60	1696.13	1696.13	112.96	487.76	69.45	670.19	1027.94	

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor
Conti Enterprises, Inc.- EWR 154.183

Address
2045 LINCOLN HIGHWAY

FIN #

Payroll #
18

Week Ending Date
2015-07-11

Project Name & Location
EWR154.183 Aviation Fuel Sys, Newark NJ

PA Contract Number
69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E R T O T A L S T O	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid							
				5	6	7	8	9	10	11													
David Marconi	X J OEC A : H		RT OT ST O	6.00 1.00	6.00 .50	8.00	8.00		29.00 1.50	43.570 65.380	1263.64 96.04 0.00 78.16	30.207	X U E 825 O	921.50	2233.02	1361.58	141.63	469.23	76.16	719.02	1614.03		
Christopher Masica	X J OEA A : H		RT OT ST O		6.00	8.00 1.00	8.00	8.00	32.00 1.00	46.275 70.620	1480.60 70.62 0.00 67.76	29.927	X U E 825 O	997.60	1935.98	1551.42	122.60	335.80	67.76	826.16	1409.82		
Nick Pietrosalvo	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00			24.00	35.750	858.00 0.00 0.00 71.39	28.280	X U E 472 O	630.72	1751.75	858.00	116.46	353.09	71.39	840.93	1210.82		
Jose Punticavano	X J LBJ A : H	1810 ZUT KNU	RT OT ST O		8.00	8.00 1.00	8.00	8.00	32.00 1.00	35.760 53.630	1144.01 53.63 0.00 61.69	26.260	X U E 472 O	867.24	1483.64	1197.64	98.08	397.93	61.69	558.60	925.04		
Edward Riho	X J OEA A : H	1710 USV FCN	RT OT ST O	8.00 1.00	8.00	8.00	8.00	8.00	40.00 1.00	47.070 70.610	1882.81 70.61 0.00 68.37	28.640	X U E 825 O	1223.44	1953.42	1953.42	123.69	367.15	68.37	658.21	1394.21		
Manuel Soares	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00 1.00			24.00 1.00	35.760 53.630	858.00 53.63 0.00 61.69	28.282	X U E 472 O	657.04	1483.64	911.63	98.98	220.86	61.69	381.33	1102.31		
Matthew Voorhees	X J OEA A : H		RT OT ST O	8.00 2.00	8.00 3.00	8.00 2.00	8.00 2.00	8.00	40.00 9.00	47.070 70.610	1882.80 636.49 0.00 88.14	32.188	X U E 825 O	1577.20	2518.29	2518.29	158.45	875.31	88.14	922.90	1595.39		

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor Cont'l Enterprises, Inc.- EWR 154.183						Address 2045 LINCOLN HIGHWAY						EIN#											
Payroll # 18				Week Ending Date 2015-07-11				Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ						PA Contract Number 69950373									
1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # if issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # If Union is checked)	Total Paid							
				5	6	7	8	9	10	11													
Bryan Wayne	J WB A : H		RT OT ST O	8.00 3.00	8.00 3.00	8.00 2.00	8.00 2.00	8.00	40.00 10.00	52.500 78.750	2100.00 787.50	63.428	X U 825 E O	3171.40	4437.50	2887.50	162.44	681.92	101.07	1165.43	3272.07		
Robert White	X J LBJ A : H	1810 PIP GAF	RT OT ST O	8.00 1.00	8.00	8.00	8.00	8.00	40.00 1.00	35.290 53.630	1435.60 53.63	26.280	X U 472 E O	1077.48	1469.23	1469.23	93.33	209.49	61.83	370.65	1118.58		

Key:

RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

NOTE:

- All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
- Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
- Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

Sworn to before me, this day
15th of July, 2015

FALSIFICATION OF THIS STATEMENT IS A PUNISHABLE OFFENSE

Elizabeth Russo
 Notary Public of New Jersey
 ID# 2362950
 My Commission Expires 8/6/2017

Elizabeth Russo

Brenda Davis certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Brenda Davis
Print Name Officer/Designee

Brenda Davis
Signature

Elyzabeth Puno
Signature of Notary Public

7-15, 2015
DATE

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Mgr (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Cont. Enterprises, 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 Cont. Enterprises, 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 otherwise under this contract required to be submitted for the subject period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wages rates contained in any wage determination incorporated into the contract and that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

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 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 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 (CRAFT)

EXPLANATION

THE PORT AUTHORITY
OF NY & NJ

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor: Conti Enterprises, Inc.- EWR 154.183
 Address: 2045 LINCOLN HIGHWAY
 EIN #:

Payroll # 19
 Week Ending Date 2015-07-18
 Project Name & Location: EWR154.183 Aviation Fuel Sys, Newark NJ
 PA Contract Number: 69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid							
				U																			
				12	13	14	15	16	17	18													
Albert Patrick Andrews	J WDH A : H		RT OT ST O	8.00 2.50	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	40.00 10.50	43.570 85.360	1742.80 686.28	35.515	X U 825 E O	1793.52	2579.08	2429.08	154.05	545.65	85.02	794.72	1794.36		
Junior Elle	J WDH A : H		RT OT ST O	8.00 2.50	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	40.00 10.50	43.570 85.360	1742.80 686.28	35.515	X U 825 E O	1793.52	2579.08	2429.08	154.06	525.22	85.02	794.30	1814.78		
Joseph Ertle III	X J LBJ A : H		RT OT ST O	8.00 .50	8.00 .50	8.00			24.00 1.00	35.760 53.620	858.00 53.62	25.282	X U 472 E O	897.04	1510.43	911.62	100.73	378.15	62.66	541.54	968.69		
Gilberto Gauda	X J OEA A : H	1715 TPT UPH	RT OT ST O	8.00	8.00	8.00			24.00	47.070	1129.68 0.00 0.00 76.84	28.480	X U 825 E O	707.52	2024.02	1129.68	128.15	411.03	70.84	610.02	1414.00		
Antonio Graca	X J LBJ A : H		RT OT ST O	8.00					8.00	35.750	286.00 0.00 0.00 75.28	26.280	X U 472 E O	210.24	1859.01	266.00	123.44	304.68	75.28	503.40	1355.61		
Klivi Groves	X J CPF A : H		RT OT ST O	8.00 0	8.00	8.00	8.00	8.00 .50	48.00 .50	61.220 76.840	2458.96 38.42 0.00 249.70	29.281	X U 254 E O	1416.17	2496.98	2496.98	154.61	548.89	249.70	954.20	1542.78		
Amando Gutierrez	J WDH A : H		RT OT ST O	8.00 2.50	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	40.00 10.50	43.570 85.360	1742.80 686.28	35.515	X U 825 E O	1793.52	2579.08	2429.08	154.06	545.65	85.02	794.73	1794.35		

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor: **Conti Enterprises, Inc.- EWR 154.183** Address: **2045 LINCOLN HIGHWAY** EIN#

Payroll # **19** Week Ending Date **2015-07-18** Project Name & Location **EWR154.183 Aviation Fuel Sys, Newark NJ** PA Contract Number **69950373**

1	2	3	4	5							6	7	8	9			11	12	13	14	15	16	17	18
				Day and Date										Supplemental Benefits										
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid								
12	13	14	15	16	17	18	Total Hrs	Base Hourly Rate of Pay	Total Base Pay															
Charles Halcher	J WD A : H		RT OT ST O		8.00 2.50	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	40.00 10.50	52.503 78.750	2100.00 828.88	63.406	X U 825 E O	3202.02	4435.36	2926.88	184.92	684.03	102.44	971.39	3513.99		
Timothy Houlihan	X J LBS A : H		RT OT ST O		8.00	8.00				18.00	36.150	670.40 0.00 859.03	26.280	X U 472 E O	420.48	1879.80	578.40	125.63	458.91	859.03	1443.57	436.23		
Kevin Lamego	X J LBJ A : H	1510- XFM ZMY	RT OT ST O		8.00 2.00	8.00	8.00			24.00 2.00	35.750 53.625	858.00 107.25 65.57	26.280	X U 472 E O	683.28	1590.88	985.25	165.97	435.14	65.57	608.68	984.20		
Angel Laureano	X J LBJ A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00 1.00	40.00 2.00	35.750 53.630	1420.00 107.28 63.63	26.280	X U 472 E O	1103.76	1537.26	1537.26	102.47	428.83	63.63	595.03	942.23		
David Marzoni	X J OEC A : H		RT OT ST O			4.00	8.00		5.00	17.00	43.571	740.70 0.00 73.97	26.482	X U 825 E O	601.20	2113.21	740.70	134.02	458.38	73.97	666.37	1446.84		
Christopher Masica	X J OEB A : H		RT OT ST O		8.00	8.00				18.00	45.480	727.88 0.00 25.47	29.480	X U 825 E O	471.68	727.68	727.38	46.11	83.02	25.47	134.66	593.06		
Joao S. Neno	X J LBJ A : H		RT OT ST O					5.00		8.00	36.761	286.01 0.00 77.57	26.280	X U 472 E O	210.24	1938.75	288.01	128.46	422.71	77.57	628.76	1309.99		

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor Conti Enterprises, Inc.- EWR 154.183				Address 2045 LINCOLN HIGHWAY				EIN#			
Payroll # 19		Week Ending Date 2015-07-18		Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ				PA Contract Number 69950373			

1	2	3	4	5							6	7	8	9			10	11	12	13	14	15	16	17	18			
				Day and Date										Total Hrs	Base Hourly Rate of Pay	Total Base Pay										Supplemental Benefits		
				S	MO	TU	WE	TH	FR	SA																Hourly Rate	Paid To (Local # if Union Is checked)	Total Paid
12	13	14	15	16	17	18																						
Jose Purificacio	X J LBJ A : H	1816 24T KNY	RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	35.790	1430.01 0.00 58.75	28.280	X U E 472	1051.20	1430.01	1430.01	95.46	378.58	59.75	533.61	896.20					
Edward Rino	X J OEA A : H	1710 45V FCN	RT OT ST O		8.00	8.00	8.00	8.00			32.00	47.070	1506.25 0.00 73.21	29.480	X U E 825	043.35	2094.64	1506.25	132.62	414.11	73.31	620.04	1474.60					
Matthew Voorhees	X J OEA A : H		RT OT ST O		8.00	8.00	5.00	8.00	8.00	1.00	37.00 2.00	47.071 70.815	1741.61 141.23 0.00 65.90	30.236	X U E 825	1179.20	1882.84	1882.84	119.22	439.03	65.90	624.15	1256.69					
Bryan Wayne	J WD A : H		RT OT ST O		8.00 2.50	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00		40.00 10.50	52.500 78.750	2100.00 826.86 0.00 102.44	63.406	X U E 825	3202.02	4485.38	2926.88	184.82	886.65	102.44	1184.21	3301.17					
Robert White	X J LBJ A : H	1810 PIP BAF	RT OT ST O		8.00	8.00	8.00				24.00	35.750	858.00 0.00 0.00 61.69	25.280	X U E 472	590.72	1463.63	858.00	56.97	208.56	61.69	389.02	1114.61					

Key:

RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

NOTE:
 1. All persons who performed any construction activity, during the period of the

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor Conti Enterprises, Inc.- EWR 154.183						Address 2045 LINCOLN HIGHWAY						FIN #											
Payroll # 19			Week Ending Date 2015-07-18			Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ						PA Contract Number 69950373											
1	2	3	4	5							6	7	8	9	10	11	12	13	14	15	16	17	18
Name Address Last Four Digits of Social Security Number	List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	SWAC or TWIC ID # If Issued	T I M E	Day and Date							Total Hrs	Base Hourly Rate of Pay	Total Base Pay	Supplemental Benefits			Gross Amt Earned	Taxable Gross Wages	FICA	With- holding tax	Other	Total Deductions	Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union Is checked)	Total Paid							
				12	13	14	15	16	17	18													

- requisition, shall be listed on the Payroll Report.
- Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
 - Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

Sworn to before me, this day
22nd of July, 2015

FALSIFICATION OF THIS STATEMENT IS A PUNISHABLE OFFENSE

I Brenda Davis certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Brenda Davis
Print Name Officer/Designee

Brenda Davis
Signature

Gina M Setzer
Signature of Notary Public

7/22, 2015
DATE

Gina M Setzer
Notary Public
New Jersey
My Commission Expires 12-31-18

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Mgr (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Conti Enterprises, 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 Conti Enterprises, 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 otherwise under this contract required to be submitted for the subject period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wages rates contained in any wage determination incorporated into the contract and that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

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 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 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 (CRAFT)

EXPLANATION

<u>EXCEPTION (CRAFT)</u>	<u>EXPLANATION</u>

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor: **Contil Enterprises, Inc.- EWR 154.183** Address: **2045 LINCOLN HIGHWAY** EIN #: _____

Payroll #: **19** Week Ending Date: **2015-07-18** Project Name & Location: **EWR154.183 Aviation Fuel Sys, Newark NJ** PA Contract Number: **69950373**

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DCL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Eamed	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid							
				12	13	14	15	16	17	18													
Albert Patrick Andrews	J WDH A : H		RT OT ST O	8.00 2.50	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	40.00 10.50	43.570 65.360	1742.80 688.28	35.515	X U E 825 O	1793.52	2579.08	2429.08	154.05	545.65	85.02	784.72	1794.36		
Junior Elio	J WDH A : H		RT OT ST O	8.00 2.50	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	40.00 10.50	43.570 65.360	1742.80 688.28	35.515	X U E 825 O	1793.52	2579.08	2429.08	154.06	525.22	85.02	784.30	1814.78		
Joseph Elio III	X J LBJ A : H		RT OT ST O	8.00 .50	8.00 .50	8.00			24.00 1.00	35.750 53.620	858.00 53.62	26.282	X U E 472 O	857.04	1510.43	811.52	100.73	378.15	62.66	541.54	988.89		
Gilberto Gesta	X J OEA A : H	1715 TPT UPH	RT OT ST O	8.00	8.00	8.00			24.00	47.070	1129.68 6.00	29.460	X U E 825 O	707.62	2024.02	1129.58	128.15	411.03	70.84	610.02	1414.00		
Antonio Grass	X J LBJ A : H		RT OT ST O	8.00					8.00	35.750	286.00 0.00 0.00 75.28	26.280	X U E 472 O	210.24	1859.01	286.00	123.44	304.68	75.28	503.40	1355.61		
Klint Groves	X J CPF A : H		RT OT ST O	8.00 0	8.00	8.00	8.00	8.00 .50	48.00 .50	51.220 76.840	2458.58 38.42	26.281	X U E 254 O	1419.17	2496.98	2496.98	154.81	549.69	249.70	954.20	1542.78		
Armando Gutierrez	J WDH A : H		RT OT ST O	8.00 2.50	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	40.00 10.50	43.570 65.360	1742.80 688.28	35.515	X U E 825 O	1793.52	2579.08	2429.08	154.06	545.65	85.02	784.73	1794.35		

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor Conti Enterprises, Inc.- EWR 154.183						Address 2045 LINCOLN HIGHWAY						E I N #					
Payroll # 19			Week Ending Date 2015-07-18			Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ						PA Contract Number 69950373					

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid							
				U	12	13	14	15	16	17													
				12	13	14	15	16	17	18													
Charles Hatcher	J WD A : H		RT OT ST O	8.00 2.50	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	40.00 10.50	52.500 78.750	2190.00 826.88	63.406	X U E 825	3202.02	4485.38	2928.38	184.82	684.03	102.44	971.39	3519.99		
Timothy Houlliban	X J LBS A : H		RT OT ST O	8.00	8.00				16.00	36.150	578.40 0.00	26.280	X U E 472	420.46	1879.80	578.40	126.83	458.91	859.03	1443.57	436.23		
Kevin Lamego	X J LBJ A : H	1510- XFM ZMY	RT OT ST O	8.00 2.00	8.00	8.00			24.00 2.00	35.750 53.825	858.00 107.25	26.280	X U E 472	683.28	1590.88	985.25	105.97	435.14	65.57	606.88	984.20		
Angel Laureano	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00	8.00 1.00	8.00 1.00	40.00 2.00	35.780 63.630	1430.00 107.28	26.280	X U E 472	1103.79	1037.28	1937.28	102.47	428.83	63.63	595.09	942.23		
David Marconi	X J OEB A : H		RT OT ST O		4.00	8.00		5.00	17.00	43.571	740.70 0.00	29.482	X U E 825	501.20	2113.21	740.70	134.02	458.38	73.87	666.37	1446.84		
Christopher Masica	X J OEB A : H		RT OT ST O	8.00	8.00				16.00	45.480	727.68 0.00	29.480	X U E 825	471.68	727.88	727.88	46.11	63.02	25.47	134.60	593.08		
Joao S. Neno	X J LBJ A : H		RT OT ST O				8.00		8.00	35.751	288.01 0.00	26.280	X U E 472	210.24	1938.76	288.01	128.48	422.71	77.57	628.78	1309.99		

**THE PORT AUTHORITY
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Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor: Conti Enterprises, Inc.- EWR 154.183
Address: 2045 LINCOLN HIGHWAY
EIN #:

Payroll #: 19
Week Ending Date: 2015-07-18
Project Name & Location: EWR154.183 Aviation Fuel Sys, Newark NJ
PA Contract Number: 69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union Is checked)	Total Paid							
				12	13	14	15	16	17	18													
Jose Purificacao	X J LBJ A : H	1816 24T KN4	RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	35.750	1430.01 0.00 59.75	26.280	X U E 472 O	1051.20	1430.01	1430.01	95.48	378.58	59.75	533.81	896.20
Edward Ribeiro	X J DEA A : H	1710 USV FCN	RT OT ST O		8.00	8.00	8.00	8.00			32.00	47.070	1506.25 0.00 73.31	29.480	X U E 825 O	843.36	2094.64	1506.25	132.62	414.11	73.31	620.04	1474.60
Matthew Voorhees	X J DEA A : H		RT OT ST O		8.00	8.00	8.00	8.00	1.00	1.00	37.00	47.071 70.815	1741.61 141.23 0.00 65.90	30.238	X U E 825 O	1179.20	1862.64	1862.64	119.22	439.03	65.90	624.15	1258.69
Bryan Wayne	J WD A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00	2.00	40.00	52.500 73.750	2100.00 828.38 0.00 102.44	63.406	X U E 825 O	3202.02	4485.38	2926.88	184.92	896.85	102.44	1184.21	3301.17
Robert White	X J LBJ A : H	1810 PIP GAF	RT OT ST O		8.00	8.00	8.00				24.00	35.750	858.00 0.00 0.00 51.69	26.280	X U E 472 O	830.72	1483.69	858.00	86.97	208.36	61.69	368.02	1114.61

Key:
RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
U - Union E - Employee O - Other
J - Journeyman A - Apprentice H - Helper

NOTE:
1. All persons who performed any construction activity, during the period of the

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor Conti Enterprises, Inc.- EWR 154.183						Address 2045 LINCOLN HIGHWAY						E I N #												
Payroll # 19			Week Ending Date 2015-07-18			Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ						PA Contract Number 69950373												
1	2	3	4	5						6	7	8	9			10	11	12	13	14	15	16	17	18
Name Address Last Four Digits of Social Security Number	List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	SWAC or TWIC ID # If Issued	T I M E	Day and Date						Total Hrs	Base Hourly Rate of Pay	Total Base Pay	Supplemental Benefits			Gross Amt Earned	Taxable Gross Wages	FICA	With- holding tax	Other	Total Deductions	Net		
				S	MO	TU	WE	TH	FR				SA	Hourly Rate	Paid To (Local # If Union is checked)								Total Paid	
				12	13	14	15	16	17				18											

- requisition, shall be listed on the Payroll Report.
- Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
 - Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

Sworn to before me, this day
22nd of July, 2015

FALSIFICATION OF THIS STATEMENT IS A PUNISHABLE OFFENSE

I Brenda Davis certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Brenda Davis
Print Name Officer/Designee

Brenda Davis
Signature

Gina M Setzer
Signature of Notary Public

7/22, 2015
DATE

Gina M Setzer
Notary Public
New Jersey
My Commission Expires 12-31-18

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Mgr (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Conti Enterprises, 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 Conti Enterprises, 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 otherwise under this contract required to be submitted for the subject period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wages rates contained in any wage determination incorporated into the contract and that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

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 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 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 (CRAFT)

EXPLANATION

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor
Conli Enterprises, Inc.- EWR 154.183

Address
2045 LINCOLN HIGHWAY

EIN #

Payroll #
20

Week Ending Date
2015-07-25

Project Name & Location
EWR154.183 Aviation Fuel Sys, Newark NJ

PA Contract Number
69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NY'S DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid							
				19	20	21	22	23	24	25													
Albert Patrick Andrews	J WDH A : H		RT OT ST O	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 4.00		40.00 12.00	43.670 65.360	1742.80 784.32	35.766	X U 825 E O	1859.84	2677.12	2527.12	160.28	570.04	88.45	827.77	1649.35	
Junior Elio	J WDH A : H		RT OT ST O	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 4.00		40.00 12.00	43.670 65.360	1742.80 784.32	35.766	X U 825 E O	1859.84	2677.12	2527.12	160.28	570.04	88.45	807.37	1869.75	
Joseph Elio III	X J LBJ A : H		RT OT ST O	8.00 .50	8.00 .50		8.00	8.00 1.00		32.00 2.00	35.760 53.625	1144.01 107.25	26.260	X U 472 E O	893.52	1537.28	1251.26	102.47	387.70	63.63	583.60	883.40	
Ciberto Guada	X J OEA A : H	1715 TPT UPH	RT OT ST O	8.00	8.00	8.00	8.00	8.00 1.00		40.00 1.00	47.070 70.610	1882.80 78.61	20.840	X U 825 E O	1223.44	2094.63	1953.41	132.63	434.51	73.31	640.45	1454.18	
Antonio Graza	X J LBJ A : H		RT OT ST O	8.00	8.00	5.00	8.00	8.00 1.00		40.00 1.50	35.750 53.627	1430.00 80.44	26.260	X U 472 E O	1090.64	1039.45	1510.44	128.58	332.20	78.19	538.07	1403.38	
Kimi Groves	X J CPF A : H		RT OT ST O	8.00	8.00 .50	6.00	8.00	8.00 1.00		40.00 1.50	51.220 76.833	2048.80 115.26	29.632	X U 254 E O	1229.72	2164.05	2164.05	194.17	438.76	216.40	789.33	1574.72	
Armando Cuñeres	J WDH A : H		RT OT ST O	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 4.00		40.00 12.00	43.670 65.360	1742.80 784.32	35.766	X U 825 E O	1859.84	2677.12	2527.12	160.27	570.04	88.45	827.76	1849.36	

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor: **Conti Enterprises, Inc.- EWR 154.183** Address: **2045 LINCOLN HIGHWAY** EIN #: _____

Payroll #: **20** Week Ending Date: **2015-07-25** Project Name & Location: **EWR154.183 Aviation Fuel Sys, Newark NJ** PA Contract Number: **69950373**

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Am't Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # If Union Is checked)	Total Paid							
				19	20	21	22	23	24	25													
				U																			
Charles Hatcher	J WD A : H		RT OT ST O	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 4.00		40.00 12.00	62,500 78,760	2,100.00 945.00 0.00 106.59	63.343 X U E O	825 3293.64	4629.00	3045.00	192.39	723.22	106.50	1022.18	3096.81		
Nonwood Hill	X J OEC A : H		RT OT ST O			8.50				8.00	43,576	348.56 0.00 0.00 48.81	23,480 X U E O	825 235.84	1417.34	348.56	89.83	297.88	49.61	437.32	980.02		
Timothy Houlihan	X J LBS A : H		RT OT ST O	8.00	8.00 .50		7.00 1.50	4.00 1.50		27.00 3.50	35,160 54,226	976.05 189.79 0.00 865.87	26,282 X U E O	472 801.60	2669.59	1165.84	137.59	529.47	865.87	1533.33	538.20		
Carlos A. Lamego	X J LBJ A : H	1710 SLA PNG	RT OT ST O			8.00 .50	8.00 1.00	8.00		24.00 1.50	35,760 53,627	858.00 80.44 0.00 91.77	26,281 X U E O	472 670.16	2314.82	936.44	155.15	641.45	91.77	686.41	1428.41		
Kevin Lamego	X J LBJ A : H	1510 XFM ZMY	RT OT ST O	8.00	8.00	8.00	8.00 .50	8.00 1.00		40.00 1.50	35,750 53,627	1430.00 80.44 0.00 84.01	26,280 X U E O	472 1090.64	2100.32	1510.44	159.17	627.95	84.01	651.13	1249.10		
Angel Laureano	X J LBJ A : H		RT OT ST O	8.00 1.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00		40.00 9.00	35,760 63,628	1430.00 482.63 0.00 77.22	26,280 X U E O	472 1287.72	1912.63	1912.63	126.54	571.68	77.22	775.84	1136.79		
David Manzoni	X J OEC A : H		RT OT ST O	8.00	2.50 1.00	4.50 1.50				15.00 2.50	43,572 65,380	653.68 163.40 0.00 60.33	31,689 X U E O	825 552.80	1437.86	816.98	81.20	233.13	50.33	374.68	1063.22		

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor: Conti Enterprises, Inc.- EWR 154.183
Address: 2045 LINCOLN HIGHWAY
E I N #:

Payroll #: 20
Week Ending Date: 2015-07-25
Project Name & Location: EWR154.183 Aviation Fuel Sys, Newark NJ
PA Contract Number: 69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # If Union Is checked)	Total Paid							
				19	20	21	22	23	24	25													
David Olivares	X J LBJ A : H		RT OT ST O		8.00						8.00	40.500	324.00 0.00 0.00 63.30	35.880	X U E 731 O	255.64	1521.65	324.00	94.34	251.40	63.30	399.04	1122.61
Jose Purificacao	X J LBJ A : H	1810 ZUT KN4	RT OT ST O		8.00	8.00 .50	8.00	9.00 1.00	8.00 1.00		40.00 2.50	35.750 53.828	1430.01 134.07 0.00 80.13	26.281	X U E 472 O	1116.96	1593.08	1564.08	102.18	586.86	80.13	799.17	1193.91
Edward Ribeiro	X J DEA A : H	1710 USV FCN	RT OT ST O		8.00	8.00 .50	8.00	8.00 1.00	8.00		40.00 1.50	47.070 70.815	1892.81 105.92 0.00 89.60	30.013	X U E 825 O	1245.51	1988.73	1988.73	125.93	378.90	60.60	674.43	1414.30
Matthew Voochec	X J DEA A : H		RT OT ST O		8.00 1.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 1.00		40.00 6.00	47.070 70.810	1892.80 423.66 0.00 80.72	31.403	X U E 825 O	1444.52	2306.46	2306.46	146.84	694.80	80.72	821.56	1484.90
Bryan Wayne	J WD A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 4.00		40.00 12.00	52.500 78.750	2100.00 945.00 0.00 106.58	63.343	X U E 825 D	3283.84	4629.00	3045.00	182.39	941.65	106.58	1240.62	3388.38
Robert White	X J LBJ A : H	1810 PIP GAF	RT OT ST O		8.00	8.00 .50	8.00	8.00 1.00			24.00 1.50	35.983 53.980	863.60 80.97 0.00 60.66	26.281	X U E 472 O	670.16	1230.67	944.57	82.01	163.86	60.66	288.75	943.84

Key:
RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor: **Cont'l Enterprises, Inc. - EWR 154.183** Address: **2045 LINCOLN HIGHWAY** EIN #:

Payroll #: **20** Week Ending Date: **2015-07-25** Project Name & Location: **EWR154.183 Aviation Fuel Sys. Newark NJ** PA Contract Number: **69950373**

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # If Union is checked)	Total Paid							
				U	20	21	22	23	24	25													

U - Union E - Employee O - Other
J - Journeyman A - Apprentice H - Helper

NOTE:

- All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
- Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
- Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

Sworn to before me, this day
29th of July, 2015

FALSIFICATION OF THIS STATEMENT IS A PUNISHABLE OFFENSE

Brenda Davis certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Brenda Davis
Print Name Officer/Designee

Brenda Davis
Signature

Elizabeth Russo
Signature of Notary Public

7/29 2015
DATE

Elizabeth Russo
Notary Public of New Jersey
ID# 2362950
My Commission Expires 8/6/2017

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Mgr (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Conti Enterprises 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 Conti Enterprises 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 otherwise under this contract required to be submitted for the subject period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wages rates contained in any wage determination incorporated into the contract and that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

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 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 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 (CRAFT)

EXPLANATION

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor
Conti Enterprises, Inc.- EWR 154.183

Address
2045 LINCOLN HIGHWAY

EIN #

Payroll #
20

Week Ending Date
2015-07-25

Project Name & Location
EWR154.183 Aviallon Fuel Sys, Newark NJ

PA Contract Number
69950373

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOJ REGISTERED) Helper	3 SWAG or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid							
				19	20	21	22	23	24	25													
Albon Patrick Andrews	J WDH A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 4.00		40.00 12.00	43.570 65.360	1742.80 784.32	35.766	X U 825 E O	1859.84	2677.12	2527.12	160.26	678.04	88.45	827.77	1849.35
Junior Elio	J WDH A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 4.00		40.00 12.00	43.570 65.360	1742.80 784.32	35.766	X U 825 E O	1859.84	2677.12	2527.12	160.26	558.64	88.45	807.37	1869.75
Joseph Eric III	X J LB# A : H		RT OT ST O		8.00 .50	8.00 .50		8.00	8.00 1.00		32.00 2.00	35.760 83.625	1144.01 107.25	26.280	X U 472 E O	893.52	1537.26	1251.26	102.47	387.76	63.83	553.86	883.40
Giberto Garcia	X J OEA A : H		RT OT ST O		8.00	8.00	8.00	8.00 1.00	8.00		40.00 1.00	47.070 70.610	1862.80 79.81	20.840	X U 825 E O	1225.44	2094.53	1853.41	132.63	434.51	73.31	648.45	1454.16
Antonio Gracia	X J LBJ A : H		RT OT ST O		8.00	8.00	8.00	8.00 .50	8.00 1.00		40.00 1.50	35.750 53.627	1430.00 80.44	26.280	X U 472 E O	1090.64	1639.45	1510.44	128.68	332.20	78.19	630.07	1400.38
Rini Graves	X J CPF A : H		RT OT ST O		8.00	8.00 .50	8.00	8.00 1.00	8.00		40.00 1.50	51.220 76.833	2048.80 115.25	29.632	X U 254 E O	1228.72	2164.05	2164.05	134.17	438.76	218.40	789.33	1374.72
Armando Gutierrez	J WDH A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 4.00		40.00 12.00	43.570 65.360	1742.80 784.32	35.766	X U 825 E O	1859.84	2677.12	2527.12	160.27	678.04	88.45	827.76	1849.36

1715
TPT
LPH

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor: **Conti Enterprises, Inc.- EWR 154.183** Address: **2045 LINCOLN HIGHWAY** EIN #: _____

Payroll #: **20** Week Ending Date: **2015-07-25** Project Name & Location: **EWR154.183 Aviation Fuel Sys, Newark NJ** PA Contract Number: **69950373**

1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # If Union is checked)	Total Paid							
				19	20	21	22	23	24	25													
Charles Hatcher	J WD A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00		40.00 12.00	52.500 76.750	2100.00 945.00 0.00 106.68	63.343	X U E 825 O	3293.84	4029.00	3045.00	182.35	723.27	106.58	1022.19	3606.81
Nonwood Hill --4	X J OEC A : H		RT OT ST O			8.00					8.00	43.570	349.56 0.00 0.00 49.81	29.480	X U E 825 O	235.84	1417.34	348.56	89.83	297.86	49.61	437.32	980.02
Timothy Houshan	X J LBS A : H		RT OT ST O	8.00	8.00 .50		7.00	4.00	1.50	1.50	27.00 3.50	36.150 54.226	876.05 189.79 0.00 865.87	26.282	X U E 472 O	691.60	2089.59	1165.84	137.99	629.47	865.87	1533.33	538.26
Carlos A. Lameyo	X J LBJ A : H	1710 SLA PNG	RT OT ST O			8.00 .50	8.00	8.00	8.00		24.00 1.50	36.760 53.627	858.00 80.44 0.00 91.77	26.281	X U E 472 O	670.16	2314.82	836.44	162.15	641.48	91.77	886.41	1428.41
Kevin Lameyo	X J LBJ A : H	1510 XFM ZMY	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	1.00	40.00 1.50	35.750 53.627	1430.00 80.44 0.00 84.01	26.260	X U E 472 O	1090.64	2100.32	1510.44	135.17	627.95	84.01	851.13	1249.19
Angel Laureano	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	2.00	40.00 9.00	35.750 53.626	1430.00 482.63 0.00 77.22	26.260	X U E 472 O	1287.72	1912.63	1912.63	126.94	571.68	77.22	776.84	1136.79
David Manzoni	X J OEC A : H		RT OT ST O	8.00	2.50 1.00	4.50	1.50				15.00 2.50	43.572 65.360	653.58 163.40 0.00 60.33	31.589	X U E 825 O	552.80	1437.86	816.98	91.20	233.13	50.33	374.66	1063.22

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor Conti Enterprises, Inc.- EWR 154.183				Address 2045 LINCOLN HIGHWAY				E I N #																
Payroll # 20		Week Ending Date 2015-07-25		Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ				PA Contract Number 69950373																
1 Name Address Last Four Digits of Social Security Number	2 List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	3 SWAC or TWIC ID # If Issued	4 T I M E	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding tax	16 Other	17 Total Deductions	18 Net	
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union is checked)	Total Paid								
				19	20	21	22	23	24	25														
David Oliveros	X J LBJ A : H		RT OT ST O		8.00						8.00	40.500	324.00 0.00 0.00 63.30	35.960	X U 731 E O	295.04	1921.65	324.00	94.34	251.40	53.30	399.04	1122.61	
Jesse Purificacao	X J LBJ A : H	1810 ZUT KNU	RT OT ST O		8.00	8.00 .50	8.00	8.00	8.00	1.00		40.00 2.50	35.750 53.628	1430.61 134.07 0.00 60.13	26.281	X U 472 E O	1116.96	1993.08	1664.08	132.18	586.86	60.13	799.17	1193.91
Edward Rine	X J OEA A : H	1710 USV FCN	RT OT ST O		8.00	8.00 .50	8.00	8.00	8.00	1.00		40.00 1.50	47.070 70.613	1882.81 105.02 0.00 69.60	30.013	X U 825 E O	1245.54	1988.73	1988.73	125.93	376.50	69.60	674.43	1414.30
Mathew Vortreas	X J OEA A : H		RT OT ST O		8.00 1.00	8.00 2.00	8.00 2.00	8.00	8.00	1.00		40.00 6.00	47.070 70.610	1882.80 423.66 0.00 80.72	31.403	X U 825 E O	1444.52	2306.48	2305.46	148.04	594.80	60.72	621.56	1484.80
Bryan Wayne	J WD A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00 2.00	8.00	8.00	4.00		40.00 12.00	52.500 78.750	2100.00 945.00 0.00 106.68	63.343	X U 825 E O	3203.84	4629.00	3045.00	182.39	841.65	106.68	1240.62	3388.38
Robert White	X J LBJ A : H	1810- PIP GAF	RT OT ST O		8.00	8.00 .50		8.00	8.00	1.00		24.00 1.50	35.883 53.898	863.60 80.57 0.00 50.86	26.291	X U 472 E O	670.16	1230.67	944.57	82.01	163.38	50.86	286.73	943.64

Key:
RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

Name Of Contractor/Subcontractor Conli Enterprises, Inc.- EWR 154.183						Address 2045 LINCOLN HIGHWAY						EIN #											
Payroll # 20			Week Ending Date 2015-07-25			Project Name & Location EWR154.183 Aviation Fuel Sys. Newark NJ						PA Contract Number 69950373											
1	2	3	4	5				6	7	8	9		10	11	12	13	14	15	16	17	18		
Name Address Last Four Digits of Social Security Number	List Trade & Check Classification Journeyman Apprentice (NYS DOL REGISTERED) Helper	SWAG or TWIC ID # if Issued	T I M E	Day and Date							Total Hrs	Base Hourly Rate of Pay	Total Base Pay	Supplemental Benefits			Gross Amt Earned	Taxable Gross Wages	FICA	With- holding tax	Other	Total Deductions	Net
				S	M	T	W	T	F	S				Hourly Rate	Paid To (Local # If Union is checked)	Total Paid							
				18	20	21	22	23	24	25													

U - Union E - Employee O - Other
J - Journeyman A - Apprentice H - Helper

NOTE:

1. All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
2. Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
3. Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

Sworn to before me, this day
29th of July, 2015

FALSIFICATION OF THIS STATEMENT IS A PUNISHABLE OFFENSE

Brenda Davis certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Brenda Davis
Print Name Officer/Designee

Brenda Davis
Signature

Elizabeth Russo
Signature of Notary Public

7/29 2015
DATE

Elizabeth Russo
Notary Public of New Jersey
ID# 2362950
My Commission Expires 8/6/2017

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Mgr (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Conti Enterprises 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 Conti Enterprises 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 otherwise under this contract required to be submitted for the subject period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wages rates contained in any wage determination incorporated into the contract and that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

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 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 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 (CRAFT)

EXPLANATION

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor or Subcontractor Ferrelra Construction Co Address 31 Tannery Rd, Banchburg, NJ 08876 EIN #

Payroll No. 14 For Week Ending 7/5/15 Project & Location: EWR154.183 Aviation Fuel System Modifications, Newark, NJ PA Contract Number: 69950373

1 Employee Name, Address, and SS. No. (last 4 digits)	2 List Trade & Circle Work Classification (Journeyman or Apprentice / Class 1,2,3)	3 SWAC or THAC ID # If Issued	4 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Hourly Rate	10 Supplemental Benefits		12 Gross Amnt Earned	13 Taxable Gross Wages	14 FICA	15 With-holding Tax	16 Other	17 Total Deductions	18 Net	
			Mon	Tue	Wed	Thu	Fri	Sat	Sun					Paid to (Local # If Union is circled)	Total Paid								
			6/29	6/30	7/1	7/2	7/3	7/4	7/5														
Andrew Billos	J-OPERATORS A	1713-WWDVDF	RT	0.5						0.5	\$42.57	\$21.29	\$30.22	U 8 2 5	\$15.11								
			OT	1.5							1.5	\$63.86	\$95.78	\$44.43	E	\$66.65	\$958.56	\$73.33	\$140.95	\$84.85	\$299.25	\$659.31	
			ST																				
			GT																				
Brian McCarthy	J_OPERATOR A	TIDB	RT			2.5				2.5	\$47.07	\$117.68	\$30.38	U 8 2 5	\$75.94								
			OT													\$1,225.80	\$93.77	\$196.43	\$67.51	\$357.71	\$668.09		
			ST																				
			GT																				
Julio Flores	J_OPERATOR A	TIDB	RT	8	8					16	\$46.07	\$737.12	\$30.33	U 8 2 5	\$485.28								
			OT	1.5	0.5						2	\$69.11	\$138.21	\$44.57	E	\$89.15	\$894.33	\$68.41	\$116.14	\$55.68	\$241.03	\$653.30	
			ST																				
			GT																				
Julio Flores	J_OPERATOR A	TIDB	RT			8	8	8		24	\$47.07	\$1,129.68	\$30.37	U 8 2 5	\$728.85								
			OT			1					1	\$70.61	70.61	\$44.63	E	\$44.63	\$1,225.79	\$93.77	\$216.83	\$75.78	\$387.48	\$838.31	
			ST																				
			GT																				
Frankie Moncham	J_Laborer J A	TIDB	RT	8	8					16	\$36.45	\$583.20	\$24.99	U 4 7 2	\$399.89								
			OT	1.5	0.5						2	\$54.68	\$109.35	\$25.00	E	\$50.01	\$742.06	\$56.76	\$110.03	\$82.63	\$250.09	\$491.97	
			ST																				
			GT																				

Key:

RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

NOTE:

- All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
- Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
- Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

I, Lou Pacheco, certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Lou Pacheco
 Print Name Officer/Designee

Signature

7/20/2015
 Date

Sworn to before me, this day
 20 of July, 2015

Signature of Notary Public

Signature of Notary Public

LINDA KISSELL
 NOTARY PUBLIC
 STATE OF NEW JERSEY
 MY COMMISSION EXPIRES DEC. 3, 2011

Statement of Compliance

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor <input type="checkbox"/> or Subcontractor <input checked="" type="checkbox"/> Ferreira Construction Co				Address 31 Tannery Rd, Banchburg, NJ 08876							EIN #												
Payroll No. 14		For Week Ending 7/5/15			Project & Location: EWR154.183 Aviation Fuel System Modifications, Newark, NJ							PA Contract Number: 69950373											
1	2	3	4	5 Day and Date							6	7	8	9	10 Supplemental Benefits		12	13	14	15	16	17	18
				Mon	Tue	Wed	Thu	Fri	Sat	Sun					Total Hrs	Base Hourly Rate of Pay							
Employee Name, Address, and SS. No. (last 4 digits)	Job Title & Circle Work Classification (Journeyman or Apprentice / Class 1,2,3)	SWAC or TWIC ID # if issued	T I M e	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Total Hrs	Base Hourly Rate of Pay	Total Base Pay	Hourly Rate	Paid to (Local) # If Union is checked	Total Paid	Gross Amt Earned	Taxable Gross Wages	FICA	Withholding Tax	Other	Total Deductions	Net
Frankie Mencham	J Laborer A _____ Class 1, 2 or 3	TIDB				8	8	8			24	\$36.45	\$874.81	\$25.00	U 4 7 2	\$599.85	\$840.82		\$71.98	\$169.02	\$108.63	\$350.48	\$590.34
Scott Pellfer	J Laborer - Foreman A _____ Class 1, 2 or 3	1514-UEBIMW		8	8						16	\$39.00	\$624.00	\$25.10	U 4 7 2	\$401.53	\$954.26		\$72.99	\$105.83	\$83.65	\$262.47	\$691.79
Scott Pellfer	J Laborer - Foreman A _____ Class 1, 2 or 3	1514-UEBIMW				0.5	0.5	8			24	\$39.00	\$936.00	\$25.10	U 4 7 2	\$602.28	\$1,190.76		\$91.10	\$147.51	\$108.62	\$347.23	\$843.53
Ramon Ramos	J Laborer A _____ Class 1, 2 or 3	TIDB		8	8						16	\$36.45	\$583.20	\$24.99	U 4 7 2	\$399.88	\$713.35		\$54.57	\$8.64	\$75.26	\$160.37	\$552.98
Ramon Ramos	J Laborer A _____ Class 1, 2 or 3	TIDB				8	8	8			24	\$36.45	\$874.82	\$25.00	U 4 7 2	\$599.88	\$840.84		\$71.98	\$31.39	\$102.29	\$234.54	\$706.53

Key:
 RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

NOTE:
 1. All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
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I, Lou Pacheco, certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Lou Pacheco 7/20/2015
 Print Name Officer/Designee Date

[Signature]
 Signature

Sworn to before me, this day
 20 of July 2015

[Signature]
 Signature of Notary Public

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

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor <input type="checkbox"/> or Subcontractor <input checked="" type="checkbox"/>		Ferreira Construction Co		Address 31 Tannery Rd, Banchburg, NJ 08876										EIN #										
Payroll No. 14		For Week Ending 7/5/15		Project & Location: EWR154,183 Aviation Fuel System Modifications, Newark, NJ										PA Contract Number: 69950373										
1	2	3	4	5							6	7	8	9	10		11	12	13	14	15	16	17	18
				Day and Date											Supplemental Benefits									
Employees Name, Address, and SS. No. (last 4 digits)	List Trade & Circle Work Classification (Journeyman or Apprentice / Class 1,2,3)	SWAC or TWOC ID # if issued	T	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Total Hrs	Base Hourly Rate of Pay	Total Base Pay	Hourly Rate	Paid to (Local # if Union is circled)	Total Paid	Gross Amt Earned	Taxable Gross Wages	FICA	With-holding Tax	Other	Total Deductions	Net	
Luis Rivera	J Laborer A _____ Class 1, 2 or 3	TIDS	R	8	8						16	\$36.45	\$583.20	\$24.99	U 4 7 2	\$399.89								
			O	1.5	0.5						2	\$54.68	\$109.35	\$25.00	E	\$50.01	\$742.06			\$56.77	\$85.46	\$222.63	\$365.53	\$376.53
			S																					
			G																					
Luis Rivera	J Laborer A _____ Class 1, 2 or 3	TIDS	R			8	8	8			24	\$36.45	\$744.81	\$25.00	U 4 7 2	\$599.85								
			O			1					1	\$54.68	\$54.68	\$24.99	E	\$24.99	\$998.25			\$76.36	\$146.06	\$113.74	\$327.06	\$661.19
			S																					
			G																					
David Schickling	J_OPERATOR A _____ Class 1, 2 or 3	TIDS	R	8	8						16	\$46.07	\$737.12	\$30.33	U 8 2 5	\$485.28								
			O	1.5	0.5						2	\$69.11	\$138.20	\$44.58	E	\$89.16	\$894.32			\$68.42	\$134.15	\$55.68	\$259.05	\$635.27
			S																					
			G																					
David Schickling	J_OPERATOR A _____ Class 1, 2 or 3	TIDS	R			8	8	8			24	\$47.07	\$1,129.69	\$30.37	U 8 2 5	\$728.89								
			O			1					1	\$70.61	70.61	\$44.63	E	\$44.63	\$1,225.80			\$93.78	\$237.24	\$75.78	\$407.80	\$817.90
			S																					
			G																					
Terry Swain	J Laborer A _____ Class 1, 2 or 3	TIDS	R	8	8						16	\$36.45	\$583.20	\$24.99	U 4 7 2	\$399.91								
			O	1.5	0.5						2	\$54.68	109.36	\$25.02	E	\$50.04	\$742.08			\$56.77	\$57.84	\$77.63	\$192.24	\$549.84
			S																					
			G																					

Key:

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J - Journeyman A - Apprentice H - Helper

I, Lou Pacheco, certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Lou Pacheco
Print Name Officer/Designee

Signature

7/20/2015
Date

Sworn to before me, this day
20 of July 20 15

[Signature]

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

Statement of Compliance

NOTE:

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THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor or Subcontractor **Ferreira Construction Co** Address **31 Tannery Rd, Banchburg, NJ 08876** EIN #

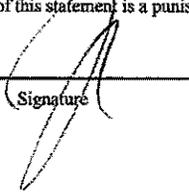
Payroll No. **14** For Week Ending **7/5/15** Project & Location: **EWR154.183 Aviation Fuel System Modifications, Newark, NJ** PA Contract Number: **69950373**

1 Employees Name, Address, and SS. No. (last 4 digits)	2 Use Trade & Circle Work Classification (Journeyman or Apprentice / Class 1,2,3)	3 SWAC or TWIC ID # If Issued	4 T M e R T O T S T G T	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Hourly Rate	10 Supplemental Benefits		12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 Withholding Tax	16 Other	17 Total Deductions	18 Net
				Mon	Tue	Wed	Thu	Fri	Sat	Sun					Paid to (Local if Union Member)	Total Paid							
				6/29	6/30	7/1	7/2	7/3	7/4	7/5													
Terry Swain	J Laborer A	TIOB	R			8	8	8			24	\$36.45	\$874.80	\$24.99	U 4 7 2	\$599.82							
			O			1					1	\$54.68	\$54.68	\$24.99	E	\$24.99	\$998.23		\$76.37	\$101.98	\$106.99	\$284.74	\$713.49
			S													O							

Key:
 RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
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I, Lou Pacheco certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Lou Pacheco
 Print Name Officer/Designee


 Signature

7/30/2015
 Date

Sworn to before me, this day
20 of July, 2015



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

- NOTE:**
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THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

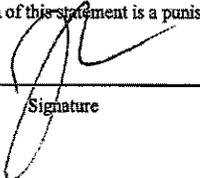
Name of Contractor <input type="checkbox"/> or Subcontractor <input checked="" type="checkbox"/> Ferrelra Construction Co		Address 31 Tannery Rd, Banchburg, NJ 08876										EIN #											
Payroll No. 15		For Week Ending 7/12/15			Project & Location: EWR154.189 Aviation Fuel System Modifications, Newark, NJ										PA Contract Number: 69950373								
1	2	3	4	5							6	7	8	9	10		12	13	14	15	16	17	18
				Day and Date											Supplemental Benefits								
Employee Name, Address, and SS. No. (last 4 digits)	Let Trade & Circle Work Classification (Journeyman or Apprentice / Class 1,2,3)	SWAC or TWIC ID # If Issued	T	M	W	Th	F	S	Total Hrs	Base Hourly Rate of Pay	Total Base Pay	Hourly Rate	Paid to (Local # if Union is circled)	Total Paid	Gross Amt Earned	Taxable Gross Wages	FICA	Withholding Tax	Other	Total Deductions	Net		
Luis Rivera	J Laborer A _____ Class 1, 2 or 3	TIDB		8					8	\$36.45	\$291.60	\$24.99	U 4 7 2	\$199.94	\$1,250.40		\$96.42	\$227.59	\$281.02	\$605.63	\$654.77		
David Schlicking	J_OPERATOR A _____ Class 1, 2 or 3	TIDB		8	8				16	\$47.07	\$753.12	\$30.37	U 8 2 5	\$485.90	\$1,922.80		\$147.10	\$459.85	\$118.87	\$727.55	\$1,195.25		
Terry Swain	J Laborer A _____ Class 1, 2 or 3	TIDB		8	8	8	8	8	40	\$35.45	\$1,458.00	\$24.99	U 4 7 2	\$999.72	\$49.99	\$1,682.85		\$128.74	\$228.45	\$179.88	\$537.07	\$1,145.78	
.	J - A _____ Class 1, 2 or 3												U										
.	J A _____ Class 1, 2 or 3												U										

Key:

RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

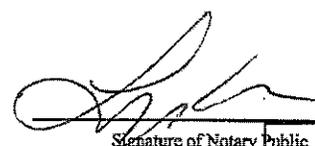
I, Lou Pacheco _____ certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Lou Pacheco
 Print Name Officer/Designee


 Signature

7/20/2015
 Date

Sworn to before me, this day
 20 of July 20 15


 Signature of Notary Public

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

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor <input type="checkbox"/> or Subcontractor <input checked="" type="checkbox"/> Ferreira Construction Co		Address 31 Tannery Rd, Banchburg, NJ 08876										EIN #																							
Payroll No. 16		For Week Ending 7/19/15				Project & Location: EWR154.183 Aviation Fuel System Modifications, Newark, NJ										PA Contract Number: 69950373																			
1	2	3	4	5 Day and Date							6	7	8	9	10 Supplemental Benefits		11	12	13	14	15	16	17	18											
				Mon	Tue	Wed	Thu	Fri	Sat	Sun					Total Hrs	Base Hourly Rate of Pay									Total Base Pay	Hourly Rate	Paid to (Local # If Union is circled)	Total Paid	Gross Amt Earned	Taxable Gross Wages	FICA	Withholding Tax	Other	Total Deductions	Net
				7/13	7/14	7/15	7/16	7/17	7/18	7/19																									
Julio Flores	J_OPERATOR A	TIOB	RT	8	8	8	8	8			40	\$47.07	\$1,882.80	\$30.37	U 8 2 5	\$1,214.75			\$1,922.80	\$147.09	\$437.58	\$118.87	\$705.27	\$1,217.53											
Scott Peiffer	J Laborer - Foreman A	1514-UEBIMW	RT	8	8	8	8	8			40	\$99.00	\$1,560.00	\$25.10	U 4 7 2	\$1,003.85			\$62.80	\$2,041.90	\$156.21	\$352.85	\$185.06	\$694.12	\$1,347.78										
Ramon Ramos	J Laborer A	TIOB	RT	8	8	8	8	8			40	\$36.45	\$1,458.00	\$25.00	U 4 7 2	\$999.71			\$1,568.00	\$119.96	\$123.42	\$170.45	\$461.97	\$1,106.03											
David Schickling	J_OPERATOR A	TIOB	RT	8	8	8	8	8			40	\$47.07	\$1,882.80	\$30.37	U 8 2 5	\$1,214.77			\$1,922.80	\$147.09	\$459.85	\$118.87	\$727.54	\$1,195.26											
Terry Swain	J Laborer A	TIOB	RT	8	8	8	8	8			40	\$36.45	\$1,458.00	\$24.99	U 4 7 2	\$999.70			\$1,568.00	\$119.94	\$204.42	\$170.45	\$494.81	\$1,073.19											

Key:

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NOTE:

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I, Lou Pacheco certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Lou Pacheco
 Print Name Officer/Designee

[Signature]
 Signature

7/24/2015
 Date

Sworn to before me, this day
24 of July, 2015

[Signature]
 Signature of Notary Public

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

Statement of Compliance

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor <input type="checkbox"/> or Subcontractor <input checked="" type="checkbox"/> BARRIER ELECTRIC COMPANY				Address 181 AVENUE A BAYONNE, NJ 07002								EIN #												
Payroll No. 0		For Week Ending 07/05/15			Project & Location: EWR 154.183								PA Contract Number:											
1	2	3	4	5							6	7	8	9	10		11	12	13	14	15	16	17	18
				Day and Date											Supplemental Benefits									
				Mon	Tue	Wed	Thu	Fri	Sat	Sun					Total Hrs	Base Hourly Rate of Pay								
28-Jun	29-Jun	30-Jun	1-Jul	2-Jul	3-Jul	4-Jul	5-Jul																	
PORTILLA, ALFRED	J ELECTRIC A Class 1, 2 or 3				8	8	8	5	0		29	57.96	1680.8		U 164		1680.84	1680.84	128.58	360.37	189.1	678.05	1002.79	
SUBRIZI, ROBERT	J ELECTRIC A Class 1, 2 or 3					8	2.5	8	0		18.5	57.96	1072.3		U 164		1072.26	1072.26	82.08	226.77	126.16	434.96	637.3	
WASLIEWICZ, JASON	J ELECTRIC A Class 1, 2 or 3				0	8	8	8	0		24	57.96	1391		U 164		1391.04	1391.04	106.41	171.59	156.5	434.5	956.54	
MACKINIAH, Brett	J ELECTRIC A Class 1, 2 or 3					8	8	8	8		32	57.96	1854.7		U 164		1854.72	1854.72	141.69	274.15	208.66	624.7	1230.02	
Brooks, Dan	J ELECTRIC A Class 1, 2 or 3						8	8	8		24	57.96	1391		U 164		1391.04	1391.04	106.41	309.22	156.49	572.12	818.92	

Key:
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NOTE:
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P. Ciommiello certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

P. Ciommiello Print Name Officer/Designee
[Signature] Signature
7/23/15 Date
[Signature] Signature of Notary Public

Sworn to before me, this day
July 23, 2015
MICHELE T LAMBOS
 Commission # 2275374
 Notary Public, State of New Jersey
 My Commission Expires
 May 09, 2016

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor or Subcontractor **BARRIER ELECTRIC COMPANY** Address **181 AVENUE A BAYONNE, NJ 07002** EIN #

Payroll No. **0** For Week Ending **07/12/15** Project & Location: **EWR 154.183** PA Contract Number:

1 Employee Name, Address, and SS. No. (last 4 digits)	2 Int Trade & Circle Work Classification (Journeyman or Apprentice / Class 1,2,3)	3 SWAC or TWIC ID # if issued	4 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 Withholding Tax	16 Other	17 Total Deductions	18 Net
			Mon	Tue	Wed	Thu	Fri	Sat	Sun				Hourly Rate	Paid to (Local # if Union is elected)	Total Paid							
			6-Jul	7-Jul	8-Jul	9-Jul	10-Jul	11-Jul	12-Jul													
PORTILLA, ALFRED	J ELECTRIC A			8	8	8	8	8		40	57.96	2318.4	U	164		2318.4	2318.4	177.36	576	260.82	1014.18	1304.22
SUBRIZI, ROBERT	J ELECTRIC A			8	4.5	0	8	8		28.5	57.96	1651.9	U			1651.86	1651.86	126.36	391.37	194.34	712.07	939.79
CIANI, CHARLIE	J ELECTRIC A			8	8	8	8	8		40	50.64	2025.6	U	164		2033.6	2033.6	155.57	521.75	228.78	906.1	1127.5
CUNNINGHAM CHRIS	J ELECTRIC A			8	8	8	8	8		40	57.96	2318.4	I			2318.4	2318.4	177.36	509.78	260.82	947.96	1370.44
BROOKS, DANIEL	J ELECTRIC A			8	8	8	8	8		40	57.96	2318.4	U			2318.4	2318.4	177.36	621.68	260.82	1059.86	1258.54

Key:
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NOTE:
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 2. Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
 3. Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

I R. Carmine certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

R. Carmine Print Name Officer/Designee
[Signature] Signature
7/20/15 Date

Sworn to before me, this day
7/20/15
MICHELE T LAMBOS
 Commission # 2275374
 Notary Public, State of New Jersey
 My Commission Expires
 May 09, 2016

[Signature]
 Signature of Notary Public

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor or Subcontractor BARRIER ELECTRIC COMPANY Address 181 AVENUE A BAYONNE, NJ 07002 EIN #

Payroll No. 0 For Week Ending 07/19/15 Project & Location: EWR 154.183 PA Contract Number:

1 Employee Name, Address, and SS. No. (last 4 digits)	2 List Trade & Class Work Classification (Journeyman or Apprentice / Class 1,2,3)	3 SWAC or TWIC ID # If Issued	4 T i m e	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 NCA	15 Withholding Tax	16 Other	17 Total Deductions	18 Net
				Mon	Tue	Wed	Thu	Fri	Sat	Sun				Hourly Rate	Paid to (Local # if Union is checked)	Total Paid							
				13-Jul	14-Jul	15-Jul	16-Jul	17-Jul	18-Jul	19-Jul													
MAKNIGHT, BRETT	J ELECTRIC A		A		8	8	8	8	8		40	57.96	2318.4		164								
			O																				
			S																				
			T																				
	Class 1, 2 or 3															2318.4	2318.4	177.35	418.44	260.82	856.61	1461.79	
SUBRIZI, ROBERT	J ELECTRIC A		A		8	8	5				21	57.96	1217.2										
			O																				
			S																				
			T																				
	Class 1, 2 or 3															1217.16	1217.16	93.12	164.21	136.92	400.52	816.64	
WASKIEWSKI, JASON	J ELECTRIC A		A						8		8	57.96	463.68		164								
			O																				
			S																				
			T																				
	Class 1, 2 or 3															463.68	463.68	35.47	4.36	52.16	91.99	371.69	
	J ELECTRIC A		A																				
			O																				
			S																				
			T																				
	Class 1, 2 or 3																						
	J ELECTRIC A		A																				
			O																				
			S																				
			T																				
	Class 1, 2 or 3																						

Key:
 RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

NOTE:
 1. All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report.
 2. Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
 3. Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced.

R. Grimaldo certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

R. Grimaldo Print Name: Officer/Designer
R. Grimaldo Signature
 7/19/15 Date

Sworn to before me, this day
 7/19/15
 MICHELE LAMBOS
 Commission # 2275374
 Notary Public, State of New Jersey
 My Commission Expires
 May 09, 2016

Michele Lambos
 Signature of Notary Public

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor or Subcontractor
 Robinson Aerial Surveys, Inc. Address One Edgeview Drive, Hackettstown, NJ 07840 EIN #

Payroll No. 14 For Week Ending July 5, 2015 Project & Location: PANYNJ, Newark Liberty Int'l Airport, Aviation Fuel System Modifications PA Contract Number: EWR 154.183

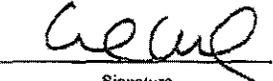
1	2	3	4	5							6	7	8	9			10	11	12	13	14	15	16	17	18			
				Day and Date										Total Hrs	Base Hourly Rate of Pay	Total Base Pay										Supplemental Benefits		
				Mon	Tue	Wed	Thu	Fri	Sat	Sun																Hourly Rate	Paid to (local # if Union is circled)	Total Paid
Brian P. McDermott	Survey			8						8	46.07	368.56	29.48	825	235.84	368.56	368.56	28.19	29.48	7.37	65.04	303.52						
Brian P. McDermott	Survey					2.5				2.5	47.07	117.68	29.48	825	73.70	117.68	117.68	9.00	9.41	2.35	20.76	96.92						

AMY H. SCUDISE
 Commission # 2391305
 Notary Public, State of New Jersey
 My Commission Expires
 November 20, 2019

Key:
 RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

Sworn to before me, this day
 10th of July 20 15

I Carlos A. Medina certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense

Carlos A. Medina  07/10/15
 Print Name Office/Designee Signature Date
 Signature of Notary Public 

NOTE:
 1 All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report
 2 Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
 3 Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced



Statement of Compliance

I do hereby state:

1. That I, Carlos A. Medina (Name of Signatory), President (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Robinson Aerial Surveys, 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 Robinson Aerial Surveys, 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 otherwise under this contract required to be submitted for the subject period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wages rates contained in any wage determination incorporated into the contract and that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

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 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 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 (CRAFT)

EXPLANATION

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor or Subcontractor
Robinson Aerial Surveys, Inc. Address One Edgeview Drive, Hackettstown, NJ 07840 FEIN #

Payroll No. 15 For Week Ending July 19, 2015 Project & Location: PANYNJ, Newark Liberty Int'l Airport, Aviation Fuel System Modifications PA Contract Number: EWR 154.183

Employee Name, Address, and SS. No. (last 4 digits)	List Trade & Grade Work Classification (Journeyman or Apprentice / Class 1,2,3)	SWAC or TWIC ID # If Issued	Day and Date							Total Hrs	Base Hourly Rate of Pay	Total Base Pay	Supplemental Benefits		Gross Amt Earned	Taxable Gross Wages	FICA	Withholding Tax	Other	Total Deductions	Net		
			Mon	Tue	Wed	Thu	Fri	Sat	Sun				Hourly Rate	Paid to (Local # If Union is circled)								Total Paid	
			13	14	15	16	17	18	19														
Brian P. McDermott	Survey				5					5	47.07	235.35	29.48	0	265	147.40	235.35	235.35	18.00	14.12	4.71	36.83	198.52
	A _____																						
	Class 1, 2 or 3																						
	J _____																						
	A _____																						
	Class 1, 2 or 3																						
	J _____																						
	A _____																						
	Class 1, 2 or 3																						
	J _____																						
	A _____																						
	Class 1, 2 or 3																						

Key:
RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
U - Union E - Employee O - Other
J - Journeyman A - Apprentice H - Helper

NOTE:
1 All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report
2 Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition
3 Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced

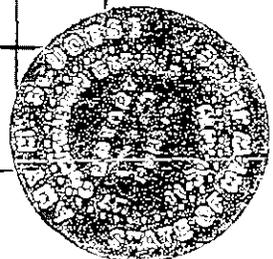
I, Kurt J. Lutz, certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense

Kurt J. Lutz  07/29/15
Print Name Officer/Designee Signature Date

Sworn to before me, this day
29th of July, 2015

AMY M. SCUDESE
Commission # 2391305
Notary Public, State of New Jersey
My Commission Expires
November 20, 2019


Signature of Notary Public



Statement of Compliance

I do hereby state:

1 That I, Kurt J. Lutz (Name of Signatory), Principal (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Robinson Aerial Surveys, 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 Robinson Aerial Surveys, 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 otherwise under this contract required to be submitted for the subject period are correct and complete, that the wage rates for laborers or mechanics contained therein are not less than the applicable wages rates contained in any wage determination incorporated into the contract and that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

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 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 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 (CRAFT)

EXPLANATION

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor or Subcontractor
Robinson Aerial Surveys, Inc.

Address
One Edgeview Drive, Hackettstown, NJ 07840

FEIN #

Payroll No.
16

For Week Ending
July 26, 2015

Project & Location:
PANYNJ, Newark Liberty Int'l Aitport, Aviation Fuel System Modifications

PA Contract Number:
EWR 154.183

1 Employee Name, Address, and SS. No. (last 4 digits)	2 Unit Trade & Grade / Work Classification (Journeyman or Apprentice / Class 1,2,3)	3 SWAC or TWIC ID # If Issued	4 Y M D C T	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Supplemental Benefits			12 Gross Amt Earned	13 Taxable Gross Wages	14 FICA	15 With- holding Tax	16 Other	17 Total Deductions	18 Net
				Mon	Tue	Wed	Thu	Fri	Sat	Sun				Hourly Rate	Paid to Local # (if Union is circled)	Total Paid							
				20	21	22	23	24	25	26													
Brian P. McDermott	Survey		A	1.5							1.5	47.07	70.61	29.48	0.825	44.22	70.61	70.61	5.40	4.94	1.41	11.75	58.86
	A		O																				
	Class 1, 2 or 3		E																				
	J		O																				
	A		E																				
	Class 1, 2 or 3		O																				
	J		O																				
	A		E																				
	Class 1, 2 or 3		O																				
	J		O																				
	A		E																				
	Class 1, 2 or 3		O																				

Key:

RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time

U - Union E - Employee O - Other

J - Journeyman A - Apprentice H - Helper

NOTE:

- All persons who performed any construction activity, during the period of the requisition, shall be listed on the Payroll Report
- Separate Payroll Reports shall be submitted by the prime contractor and each subcontractor who performed any on-site construction activity during the period of the requisition.
- Failure to provide the required Payroll Report may result in the requisition for payment being returned unpaid or the payment being reduced

I, Kurt J. Lutz certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of Payroll is truthful, complete and accurate. I understand that falsification of this statement is a punishable offense.

Kurt J. Lutz

Print Name Officer/Designee

[Signature]
Signature

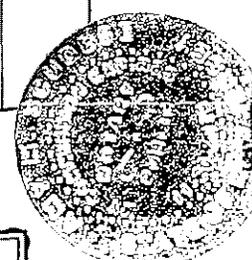
07/29/15

Date

Sworn to before me, this day
29th of July, 2015

AMY M. SCUDESE
Commission # 2391305
Notary Public, State of New Jersey
My Commission Expires
November 20, 2019

[Signature]
Signature of Notary Public



Statement of Compliance

I do hereby state:

1. That I, Kurt J. Lutz (Name of Signatory), Principal (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Robinson Aerial Surveys, 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 Robinson Aerial Surveys, 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 otherwise under this contract required to be submitted for the subject period are correct and complete, that the wage rates for laborers or mechanics contained therein are not less than the applicable wages rates contained in any wage determination incorporated into the contract and that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

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 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 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 (CRAFT)

EXPLANATION
