

Olivencia, Mildred

From: efraass@ualocal475.org
Sent: Wednesday, January 13, 2016 3:24 PM
To: Olivencia, Mildred
Cc: Torres-Rojas, Genara; Van Duyne, Sheree; Ng, Danny; Shalewitz, William
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: 908-239-4091
Required copies of the records: No

List of specific record(s):

Certified Payroll Project EWR-154.183 Conti Enterprises for weeks ending: Sat. 81 Sat. 88 Sat. 815 Sat.822
Sat. 829 Sat. 95 Sat. 912 Sat. 919 Sat. 926 Sat. 103 Sat. 1010 Sat. 1017 Sat. 1024 Sat. 1031 Sat. 117 Sat. 1114
Sat. 1121 Sat. 1128 Sat. 125 Sat. 1212 Sat. 1219 Sat. 1226 Calender year 2015 Thanks very much

THE PORT AUTHORITY OF NY & NJ

FOI Administrator

January 28, 2016

Mr. Ed Fraass
UA Local 75
135 Mt. Bethel Road
Warren, NJ 07059

Re: Freedom of Information Reference No. 16611

Dear Mr. Fraass:

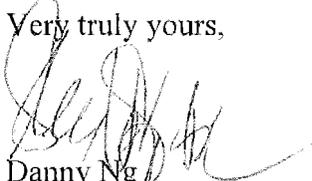
This is in response to your January 13, 2016 request, which has been processed under the Port Authority's Freedom of Information Code (the "Code", copy enclosed) for copies of certified payroll related to Project No. EWR-154.183 Conti Enterprises for the following weeks endings for calendar year 2015: Sat. 8/1, Sat. 8/8, Sat. 8/15, Sat. 8/22, Sat. 8/29, Sat. 9/5, Sat. 9/12, Sat. 9/19, Sat. 9/26, Sat. 10/3, Sat. 10/10, Sat. 10/17, Sat. 10/24, Sat. 10/31, Sat. 11/7, Sat. 11/14, Sat. 11/21, Sat. 11/28, Sat. 12/5, Sat. 12/12, Sat. 12/19, Sat. 12/26.

Material responsive to your request can be found on the Port Authority's website at <http://www.panynj.gov/corporate-information/foi/16611-C.pdf>. Paper copies 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, 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 3642 F: 212 435 7555*

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 # **21** Week Ending Date **2015-08-01** 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 Apprentice Journeyman (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							
				26	27	28	29	30	31	1													
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	43.570 65.360	1742.80 653.60	35.428	X U 825 E O	1771.40	2546.40	2396.40	161.98	534.50	83.87	770.36	1776.04
Junior Elle	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	43.570 65.360	1742.80 653.60	35.428	X U 825 E O	1771.40	2546.40	2396.40	161.98	514.11	83.87	749.96	1796.44
Joseph Ertle III	X J LBJ A : H		RT OT ST O				8.00 .50	8.00	8.00		24.00 .50	35.750 53.620	856.00 26.81	26.281	X U 472 E O	643.88	884.81	884.81	69.03	162.84	36.82	246.69	638.12
Gilberto Gaada	X J OEA A : H	1775 TPT UPH	RT OT ST O			8.00 1.00	8.00 1.00	8.00 .50	8.00		32.00 2.50	47.070 70.612	1506.24 176.53	30.546	X U 825 E O	1053.92	1682.77	1682.77	106.55	297.61	68.89	463.05	1219.72
Klint Groves	X J CPF A : H		RT OT ST O		8.00	8.00	8.00	8.00 .50	8.00 1.00		40.00 1.50	51.220 76.833	2048.80 115.25	29.632	X U 254 E O	1229.72	2164.05	2164.05	134.17	438.76	216.40	789.35	1374.70
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	43.570 65.360	1742.80 522.88	35.062	X U 825 E O	1682.96	2415.68	2265.68	143.70	489.95	79.30	712.95	1702.73
Charles Halcher	J WD A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00 2.00				24.00 6.00	52.500 78.750	1260.00 472.50	72.761	X U 825 E O	2182.84	2942.50	1732.50	109.46	295.28	60.64	465.38	2477.12

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

Payroll #: **21** Week Ending Date: **2015-08-01** 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							
				26	27	28	29	30	31	1													
Timothy Houlihan	X J LBS A : H	1510 VXL VBS	RT OT ST O		7.00	8.00	8.00	8.00	8.00		39.00	36.151 0.00 0.00 843.38	26.280	X U 472 E O	1024.92	1446.02	1409.87	97.37	306.44	843.38	1247.19	198.83	
Carlos A. Lamego	X J LBJ A : H	1710 SLA PWG	RT OT ST O		8.00 1.00	8.00 1.00	8.00 1.00	8.00 .50	8.00		40.00 3.50	35.750 53.629	26.280	X U 472 E O	1143.20	2046.70	1617.70	135.68	538.75	82.07	756.50	1290.20	
Kevin Lamego	X J LBJ A : H	1510 XFM ZMY	RT OT ST O			8.00	8.00	8.00	8.00		32.00 .50	35.750 53.620	26.281	X U 472 E O	854.12	1456.81	1170.81	97.23	388.00	60.72	545.95	910.86	
Aneel Laureano	X J LBJ A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 1.00		40.00 9.00	35.750 53.629	26.280	X U 472 E O	1287.72	1912.66	1912.66	126.94	571.69	77.22	775.85	1136.81	
David Marconi	X J OEC A : H		RT OT ST O				8.00 1.50	8.00 .50			16.00 2.00	43.571 65.360	31.118	X U 825 E O	560.12	627.85	827.85	52.50	111.77	28.98	193.25	634.60	
Jose Purificacao	X J LBJ A : H	1810 ZUT KNU	RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	35.751	26.280	X U 472 E O	1051.20	1859.02	1430.02	123.44	535.49	75.28	734.21	1124.81	
Edward Riho	X J OEA A : H	1710 USV FCN	RT OT ST O		8.00 1.00	8.00 1.00	8.00 .50	8.00	8.00		40.00 2.50	47.070 70.616	30.347	X U 825 E O	1289.76	2624.22	2059.34	166.15	590.15	91.85	848.15	1776.07	

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Name Of Contractor/Subcontractor Conti Enterprises, Inc.- EWR 154.183	Address 2045 LINCOLN HIGHWAY	EIN #
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Payroll # 21	Week Ending Date 2015-08-01	Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ	PA Contract Number 69950373
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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	MO	TU	WE	TH	FR	SA													
				26	27	28	29	30	31	1													
Michael Scalley	X J OEA A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	46,435	1857.39 0.00 0.00 65.01	29,480	X U 825 E O	1179.20	1857.39	1857.39	117.63	277.60	65.01	460.24	1397.15
Matthew Voorhees	X J OEC A : H		RT OT ST O		8.00	6.00	8.00	8.00	8.00		40.00 9.00	43,570 65,360	1742.80 588.24 0.00 81.59	32,168	X U 825 E O	1577.20	2331.04	2331.04	147.84	605.63	81.59	835.06	1495.98
Bryan Wavne	J WD A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00 10.00	52,500 78,750	2100.00 787.50 0.00 101.07	63,428	X U 825 E O	3171.40	4437.50	2887.50	182.43	881.92	101.07	1165.42	3272.08

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:

- 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
5th of August, 2015

**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 #: **21** Week Ending Date: **2015-08-01** 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									
				26	27	28	29	30	31	1															

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

Elizabeth Russo 8/05 ,20 15
Signature of Notary Public 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
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Name Of Contractor/Subcontractor: **Conti Enterprises, Inc.- EWR 154.183** Address: **2045 LINCOLN HIGHWAY** EIN #: _____

Payroll #: **22** Week Ending Date: **2015-08-08** 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 Unlon Is checked)	Total Paid							
				2	3	4	5	6	7	8													
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	43.570 65.360	1742.80 653.60	35.428	X U 825 E O	1771.40	2546.40	2396.40	151.99	534.50	83.87	770.36	1776.04	
Junior Elle	J WDH A : H		RT OT ST O			8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	32.00 8.00	43.570 65.360	1394.24 522.88	36.178	X U 825 E O	1447.12	2067.12	1917.12	121.59	350.75	67.10	539.44	1527.68	
Joseph Erie III	X J LBJ A : H		RT OT ST O	8.00 .50	8.00	8.00 1.00	8.00	8.00 .50	40.00 2.00	35.750 53.625	1430.00 107.25	26.280	X U 472 E O	1103.76	1637.25	1537.25	102.47	387.76	63.63	553.66	983.39		
Gilberto Ganza	X J OEA A : H	1715 TPT UPA	RT OT ST O	8.00	8.00	8.00 1.00		8.00	32.00 1.00	47.070 70.610	1506.24 70.51	29.927	X U 825 E O	987.56	2200.55	1576.35	139.33	469.72	77.02	666.07	1514.48		
Kini Groves	X J CPF A : H		RT OT ST O	8.00 .50	8.00	8.00	8.00	8.00	40.00 .50	51.220 76.840	2048.80 38.42	29.290	X U 254 E O	1188.26	2087.22	2087.22	129.41	413.16	208.72	751.31	1335.91		
Amando 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	43.570 65.360	1742.80 653.60	35.428	X U 825 E O	1771.40	2546.40	2396.40	151.99	534.49	83.87	770.35	1776.05		
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 78.760	2100.00 787.50	63.428	X U 825 E O	3171.40	4437.50	2887.50	182.43	671.31	101.07	954.81	3482.69		

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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 #: 22
 Week Ending Date: 2015-08-08
 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							
				2	3	4	5	6	7	8													
Timothy Houlihan	<input checked="" type="checkbox"/> J LBS A : H	1510 VXL VBS	RT OT ST O	7.00 .50	8.00	8.00 1.00	4.00 .50			27.00 2.00	36.160 64.225	975.05 108.45	26.281	<input checked="" type="checkbox"/> U 472 E O	752.16	2095.71	1084.50	199.75	539.88	866.85	1546.46	550.25	
Carlos A. Lamego	<input checked="" type="checkbox"/> J LBJ A : H	1710 SLA PNG	RT OT ST O	8.00 .50	8.00	8.00	8.00			32.00 .50	35.750 53.620	1144.00 26.81	26.281	<input checked="" type="checkbox"/> U 472 E O	854.12	1170.81	1170.81	78.13	225.40	48.77	352.30	818.51	
Kevin Lamego	<input checked="" type="checkbox"/> J LBJ A : H	1510 XFM ZMY	RT OT ST O	8.00 .50	8.00	8.00 1.00	8.00	8.00		40.00 1.50	35.750 53.527	1430.00 60.44	26.280	<input checked="" type="checkbox"/> U 472 E O	1090.54	1510.44	1510.44	100.72	408.85	62.68	570.23	940.21	
Angel Laureano	<input checked="" type="checkbox"/> J LBJ 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	35.750 53.630	1430.00 536.30	26.280	<input checked="" type="checkbox"/> U 472 E O	1314.00	1966.30	1966.30	130.43	592.68	79.16	802.27	1164.03	
David Marconi	<input checked="" type="checkbox"/> J OEC A : H		RT OT ST O	7.50	8.00 1.00	6.00			5.00	21.50 6.00	43.570 65.360	936.76 392.16	32.695	<input checked="" type="checkbox"/> U 825 E O	899.12	2461.80	1328.92	156.14	557.92	86.16	800.22	1661.68	
Jose Purificacao	<input checked="" type="checkbox"/> J LBJ A : H	1810 ZUT KNU	RT OT ST O					8.00		8.00	35.750	286.00 0.00	26.280	<input checked="" type="checkbox"/> U 472 E O	210.24	2582.96	286.00	170.63	812.89	101.47	1084.99	1497.97	
Edward Riho	<input checked="" type="checkbox"/> J OEA A : H	1710 USV FCN	RT OT ST O	8.00 .50	8.00					16.00 .50	47.070 70.820	753.12 35.31	28.926	<input checked="" type="checkbox"/> U 825 E O	493.78	2306.48	786.43	146.04	484.53	80.72	711.29	1595.19	

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

Payroll #: 22
Week Ending Date: 2015-08-08
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 Wagas	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							
				2	3	4	5	6	7	8													
Michael Scalfey	X J OEA A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	46.434	1857.36	30.182	X U 825	1267.54	1898.58	1898.58	126.58	316.38	68.95	512.91	1485.67	
						2.00				2.00	70.610	141.22											
												0.00											
												69.95											
Matthew Voorhees	X J OEA A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	47.070	1882.60	32.064	X U 825	1555.08	2482.99	2482.99	157.22	661.89	86.90	906.01	1576.98	
				2.00	.50	2.00	2.00	2.00		8.50	70.611	600.19											
												0.00											
												86.90											
James Malone	J WD A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	52.500	2108.00	63.428	X U 825	3171.40	4437.50	2887.50	182.44	881.91	101.07	1165.42	3272.08	
				2.00	2.00	2.00	2.00	2.00		10.00	78.750	787.50											
												0.00											
												101.07											
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	26.280	X U 472	657.00	911.63	911.63	60.78	88.73	37.79	187.30	724.33	
						1.00				1.00	53.630	53.63											
												0.00											
												37.79											

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.

Sworn to before me, this day

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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						FIN#											
Payroll # 22			Week Ending Date 2015-08-08			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
				2	3	4	5				6	7	8										

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

12th of August, 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

Elizabeth Russo
Signature of Notary Public

8/12 , 20 15
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 #: 23
 Week Ending Date: 2015-08-15
 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									
				9	10	11	12	13	14	15															
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	43.570 65.360	1742.81 653.60	35.428	X U 825 E O	1771.40	2546.41	2396.41	151.98	534.51	83.87	770.36	1776.05				
Junior Eile	J WDH A : H		RT OT ST O	8.00 2.00	8.00 3.00	8.00 2.00	8.00 2.00	8.00 2.00	40.00 11.00	43.570 65.360	1742.81 718.96	35.501	X U 825 E O	1815.64	2611.77	2461.77	156.14	536.38	86.16	778.68	1833.09				
Joseph Ertle III	J F3 A : H		RT OT ST O	8.00 .50	8.00 1.00	8.00 1.00	8.00 1.00	8.00 1.00	40.00 2.50	37.100 58.324	1484.00 140.81	26.280	X U 472 E O	1116.92	1624.81	1624.81	107.98	418.19	66.12	592.29	1032.52				
Gilberto Geadra	X J OEA A : H	1715 TPT UPH	RT OT ST O	8.00	8.00 1.50	8.00 1.50	8.00	8.00	40.00 3.00	47.070 70.613	1882.81 211.84	30.508	X U 825 E O	1311.88	2094.65	2094.65	132.63	434.50	73.31	640.44	1454.21				
Vincenzo Gentilomo	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 59.75	26.280	X U 472 E O	1051.20	1430.00	1430.00	95.48	369.78	59.75	525.01	904.99				
Klint Groves	X J CPF A : H		RT OT ST O	8.00	8.00	8.00 .50	8.00	8.00	40.00 .50	51.220 76.840	2046.80 38.42	28.290	X U 254 E O	1166.26	2087.22	2087.22	128.41	413.16	208.72	751.29	1335.93				
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	43.570 65.360	1742.81 653.60	35.428	X U 825 E O	1771.40	2546.41	2396.41	151.98	534.51	83.87	770.36	1776.05				

**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 #: **23** Week Ending Date: **2015-08-15** 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							
				9	10	11	12	13	14	15													
Charles Halcher	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	62,500 78,750	2100.00 787.50	63.428	X U E 825	3171.40	4437.50	2687.50	182.44	671.31	101.07	954.82	3482.68	
Timothy Houlhan	X J LBS A : H	1510 VXL VBS	RT OT ST O	2.00	5.00 1.00		6.00 1.00	8.00 .50		21.00 2.50	36,150 54,228	759.15 135.57	26.281	X U E 472	617.60	1958.15	894.72	130.74	486.84	772.88	1390.46	567.69	
Kevin Lamego	X J LBJ A : H	1510 XFM ZMY	RT OT ST O	8.00 .50	2.00	8.00 .50	8.00	8.00		26.00 1.00	35,750 53,620	929.51 53.62	26.280	X U E 472	709.56	983.13	583.13	65.56	220.61	40.78	326.95	656.18	
Angel Laureano	X J LBJ 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	35,750 53,626	1430.01 536.26	28.280	X U E 472	1314.00	1966.27	1868.27	130.44	592.68	79.16	802.28	1163.99	
David Marconi	X J OEC A : H		RT OT ST O	8.00 1.00	8.00 1.00	8.00 1.00	4.00	4.00		32.00 3.00	43,570 65,360	1394.24 196.08	30.744	X U E 825	1076.04	1764.50	1590.32	111.01	325.78	61.76	499.46	1265.14	
John F McGuire	X J OEA A : H		RT OT ST O	8.00	8.00 .50	8.00	8.00	8.00		40.00 .50	46,116 68,220	1844.64 34.11	29.662	X U E 825	1201.32	1679.75	1878.75	119.01	342.62	65.75	527.38	1351.37	
Jose Purificacao	X J LBJ A : H	1810 ZUT KNU	RT OT ST O	8.00 .50	2.00	8.00 .50	8.00	8.00 1.00		34.00 2.00	35,750 53,625	1215.51 107.25	26.280	X U E 472	946.08	1832.20	1322.76	121.36	523.20	73.11	717.67	1114.53	

**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 #: 23
Week Ending Date: 2015-08-15
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 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							
				9	10	11	12	13	14	15													
Edward Rilho	X J OEA A : H	1710 USV FCN	RT OT ST O			8.00	8.00 .50	8.00	8.00		32.00 .50	47.070 70.620	1506.24 35.31	29.707	X U 825 E O	965.46	2212.35	1541.55	140.08	453.23	77.43	670.74	1541.61
Michael Scalley	X J OEA A : H		RT OT ST O		8.00 .50	8.00	8.00	8.00	8.00 .50		40.00 1.00	47.070 70.620	1882.80 70.62	29.840	X U 825 E O	1223.44	1953.42	1953.42	123.69	300.80	68.37	492.86	1460.56
Matthew Voorhees	X J OEA 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	47.070 70.610	1882.81 706.10	32.428	X U 825 E O	1621.40	2588.91	2588.91	163.92	702.14	90.61	956.67	1632.24
Bryan Wavne	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 825 E O	3171.40	4437.50	2887.50	182.43	881.82	101.07	1165.42	3272.08
Robert White	X J LBJ A : H	1810 PIP GAF	RT OT ST O		8.00 .50	8.00 1.50	8.00	8.00	8.00 1.00		40.00 3.00	35.750 53.627	1430.00 160.88	26.260	X U 472 E O	1130.04	1590.98	1590.98	105.97	233.36	65.57	404.90	1185.98

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

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Manager (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 #: **23** Week Ending Date: **2015-08-15** Project Name & Location: **EW154.183 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									
				9	10	11	12	13	14	15															

- 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
19th of August, 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

Elizabeth Russo
Signature of Notary Public

8/19, 2015
DATE

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

**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 #
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Payroll # 24	Week Ending Date 2015-08-22	Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ	PA Contract Number 69950373
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1	2	3	4	5							6	7	8	9			12	13	14	15	16	17	18											
				Day and Date										Supplemental Benefits																				
				S	U	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	With-holding tax	Other	Total Deductions	Net
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	43.570 65.360	1742.80 653.60	35.428	X U 825 E O	1771.40	2546.40	2396.40	151.99	534.49	83.87	770.35	1776.05													
Adefino H. DeMatos	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00 .50	40.00 .50	35.890 53.620	1435.61 26.81	26.280	X U 472 E O	1064.36	1462.42	1462.42	87.57	253.70	60.86	412.13	1050.29													
Junior Elite	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	43.570 65.360	1742.80 653.60	35.428	X U 825 E O	1771.40	2546.40	2396.40	151.98	514.09	83.87	749.94	1796.46													
Joseph Erle III	J F3 A : H		RT OT ST O	8.00 1.00	8.00 1.00	8.00	8.00	8.00	40.00 2.00	38.000 57.000	1520.00 114.00	26.280	X U 472 E O	1103.76	1634.00	1634.00	108.47	420.87	66.05	585.39	1038.61													
Gilberto Goods	X J OEA A : H	1715 TPT UPH	RT OT ST O	8.00 1.00	8.00 1.50	8.00 .50	8.00 2.00	8.00 1.50	40.00 6.50	47.070 70.612	1882.80 458.98	31.541	X U 825 E O	1466.64	2341.78	2341.78	148.27	516.67	81.96	746.90	1594.88													
Klint Groves	X J CPF A : H		RT OT ST O	8.00	8.00	8.00 1.50	8.00 1.00	8.00 2.00	40.00 4.50	51.220 76.831	2048.80 345.74	30.564	X U 254 E O	1360.09	2394.54	2394.54	148.48	515.55	239.48	903.47	1491.07													
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	43.570 65.360	1742.80 653.60	35.428	X U 825 E O	1771.40	2546.40	2396.40	151.99	534.50	83.87	770.36	1776.04													

**THE PORT AUTHORITY
OF NY & NJ**

Certification of Payroll
To Be Submitted With Application For Payment

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

Address
2045 LINCOLN HIGHWAY

E_I_N#

Payroll #
24

Week Ending Date
2015-08-22

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							
				16	17	18	19	20	21	22													
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 825 E O	3171.40	4437.50	2887.50	182.43	654.68	101.07	938.18	3499.32
Timothy Houlihan	X J LBS A : H	1510 VXL VDS	RT OT ST O		4.00	5.50	8.00	8.00 1.00	8.00		33.50 1.00	36.150 54.230	1211.04 54.23	26.281	X U 472 E O	906.68	1500.25	1265.27	100.90	325.51	756.34	1182.75	317.50
Arnold Grant Jones	X J CPJ A : H		RT OT ST O		8.00	8.00	8.00 1.50	8.00 1.00	8.00 2.00		40.00 4.50	44.540 66.811	1781.60 300.65	26.634	X U 254 E O	1185.22	2082.25	2082.25	129.10	370.72	208.22	708.04	1374.21
Kevin Lamego	X J LBJ A : H	1510 XFM ZMY	RT OT ST O			8.00	8.00	8.00	8.00		32.00	35.750	1144.00 0.00	26.280	X U 472 E O	840.96	1144.00	1144.00	76.38	277.43	47.80	401.61	742.39
Angel Laureano	X J LBJ 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	35.750 53.628	1430.00 536.28	26.280	X U 472 E O	1314.00	1966.28	1966.28	130.43	592.68	79.16	802.27	1164.01
David Marooni	X J OEC A : H		RT OT ST O		8.00	6.00	4.50 1.00	6.00 .50	2.00		24.50 2.00	43.571 65.360	1067.49 130.72	30.590	X U 825 E O	810.64	2592.52	1198.21	164.43	601.45	90.74	856.62	1735.90
John F McGuire	X J OEA A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	47.070	1882.81 0.00	28.480	X U 825 E O	1179.20	1882.81	1882.81	119.21	343.69	65.89	528.78	1354.02

**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 #: 24
 Week Ending Date: 2015-08-22
 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							
				16	17	18	19	20	21	22													
Jose S. Neno	X J LBJ A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00	1.50	40.00 1.50	35.750 53.827	1430.01 80.44	26.280	X U 472 E O	1090.64	1510.45	1510.45	100.72	277.03	62.66	440.41	1070.04
Nick Pietrolucovo	X J LBPT A : H		RT OT ST O					8.00	8.00	.50	16.00 .50	36.450 54.680	583.20 27.34	26.281	X U 472 E O	433.64	610.54	610.54	40.67	76.55	25.16	142.38	468.16
Jose Purificacao	X J LBJ A : H	1810 ZUT KNU	RT OT ST O		8.00	8.00	8.00	8.00	8.00	.50	40.00 1.00	35.750 53.620	1430.01 53.62	26.281	X U 472 E O	1077.52	1912.63	1483.63	126.93	556.03	77.22	760.18	1162.45
Edward Riho	X J OEA A : H	1710 USV FCN	RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	47.070	1882.81 0.00	29.480	X U 825 E O	1179.20	2447.69	1882.81	154.98	531.46	85.67	772.11	1675.58
Michael Scaley	X J OEA A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00 .50	47.071 70.620	1882.82 35.31	29.662	X U 825 E O	1201.32	1916.13	1916.13	121.45	291.95	67.13	480.53	1437.60
Matthew Voorhees	X J OEA 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	47.070 70.510	1882.80 554.88	31.937	X U 825 E O	1532.96	2447.68	2447.68	154.88	548.47	85.67	889.12	1558.56
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	52.500 78.750	2100.00 787.50	63.428	X U 825 E O	3171.40	4437.50	2887.50	182.44	881.82	101.07	1165.43	3272.07

**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 # 24			Week Ending Date 2015-08-22			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							
				16	17	18	19	20	21	22													
Robert White	X J LBJ A : H	1810 PIP GAF	RT OT ST O	8.00 1.00	8.00 1.50	8.00	8.00 2.00	8.00 1.50	40.00 5.00	35.750 53.627	1430.00 321.76 0.00 71.39	28.280	X U 472 E O	1208.86	1751.76	1751.76	116.45	271.50	71.39	459.34	1292.42		

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
26th of August, 2015

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

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 Brenda Davis Gina M Setzer 8/26 2015

Print Name Officer/Designee Signature Signature of Notary Public DATE

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Manager (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 #
25

Week Ending Date
2015-08-29

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																			
				23	24	25	26	27	28	29													
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	8.00 2.00	8.00	40.00 18.00	43.570 65.360	1742.80 1176.48	36.641	X U 825 E O	2125.16	3069.20	2919.28	185.15	712.95	102.18	1000.28	2069.00
Adelino H. DeMatos	X J LBJ A : H		RT OT ST O	8.00 1.00	8.00 1.00	8.00 1.00	8.00 1.00	8.00	8.00		40.00 4.00	35.750 53.630	1430.00 214.52	26.280	X U 472 E O	1156.32	1644.52	1644.52	109.47	312.90	67.51	489.88	1154.64
Junor Elie	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	8.00	8.00	40.00 18.00	43.570 65.360	1742.80 1176.48	36.641	X U 825 E O	2125.16	3069.28	2919.28	185.15	692.88	102.18	980.18	2089.09
Joseph Erie III	J F3 A : H		RT OT ST O	8.00 .50	8.00 1.00	8.00 .50	8.00 1.00	8.00 .50	8.00		40.00 3.50	38.000 57.000	1520.00 199.50	26.280	X U 472 E O	1143.20	1719.50	1719.50	114.03	451.55	69.09	634.67	1084.83
Gilberto Goada	X J DEA A : H	1715 TPT UPH	RT OT ST O	8.00 2.00	8.00	8.00	8.00 1.00	8.00	8.00		32.00 3.00	47.071 70.610	1506.26 211.83	30.744	X U 825 E O	1076.04	1718.09	1718.09	108.79	309.34	60.13	478.26	1239.83
Klnt Groves	X J CPF A : H		RT OT ST O	8.00	8.00	8.00 1.00	8.00	8.00	8.00		40.00 1.00	51.220 76.830	2048.80 76.83	29.463	X U 254 E O	1207.98	2125.63	2125.63	131.79	425.89	212.57	770.35	1355.28
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	8.00	8.00	40.00 18.00	43.570 65.360	1742.81 1176.48	36.641	X U 825 E O	2125.16	3069.29	2919.29	185.15	713.46	102.18	1000.79	2068.50

**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 #
25

Week Ending Date
2015-08-29

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							
				23	24	25	26	27	28	29													
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	8.00 2.00	40.00 18.00	52.500 78.750	2100.00 1417.50	63.123	X U 825 E O	3661.16	5203.50	3517.50	222.24	860.97	123.12	1206.33	3997.17
Arnold Grant Jones	X J CPJ A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00 1.00	44.540 66.810	1781.60 66.81	25.677	X U 254 E O	1052.75	1848.41	1848.41	114.60	292.80	184.84	592.24	1256.17
Kevin Lamego	X J LBJ A : H	1510 XFM ZMY	RT OT ST O		8.00	8.00		8.00	8.00		32.00 1.00	35.750 53.630	1144.01 53.63	26.280	X U 472 E O	867.24	1197.64	1197.64	79.88	295.79	49.74	425.41	772.23
Angel Laureano	X J LBJ 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	8.00	40.00 18.00	35.750 53.626	1430.01 965.20	26.280	X U 472 E O	1524.24	2395.27	2395.27	158.40	759.98	94.68	1013.06	1382.21
David Maroon	X J OEC A : H		RT OT ST O		5.50		5.00	8.00	5.00	8.00	23.50 10.00	43.571 65.360	1023.91 653.60	33.882	X U 825 E O	1135.04	2396.42	1677.51	151.99	536.16	83.87	772.02	1624.40
John F McGure	X J OEA A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	47.070	1882.81 0.00	29.480	X U 825 E O	1179.20	1882.81	1882.81	119.22	343.69	65.69	528.80	1354.01
Anthony Myrnyj	X J OEB A : H		RT OT ST O					8.00	8.00		16.00	45.480	727.68 0.00	29.460	X U 825 E O	471.68	1819.20	727.68	115.27	423.61	63.68	602.56	1216.64

**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 #: 25
Week Ending Date: 2015-08-29
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 of 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							
				23	24	25	26	27	28	29													
Joao S. Neno	X J LBJ A : H		RT OT ST O		8.00 2.00	8.00	8.00	8.00 .50	8.00		40.00 2.50	35.751 53.624	1430.02 134.06	26.280	X U 472 E O	1116.92	1564.08	1564.08	104.22	295.37	64.60	464.19	1099.89
Luis F. Pereira	X J LBJ A : H		RT OT ST O					8.00 1.00	8.00 1.50		16.00 2.50	35.750 53.628	572.00 134.07	26.281	X U 472 E O	485.20	706.07	706.07	46.93	89.06	28.75	154.74	541.33
Nick Petrolacovo	X J LBJ A : H		RT OT ST O					8.00	8.00		16.00	35.751	572.01 0.00	26.280	X U 472 E O	420.48	1456.82	572.01	97.23	252.43	60.72	410.38	1046.44
Jose Purificacao	X J LBJ A : H	1810 24T KNH	RT OT ST O		8.00 1.00	8.00 1.00	8.00				24.00 2.00	35.750 53.630	856.00 107.26	26.280	X U 472 E O	683.28	1642.10	965.26	122.14	527.81	73.95	723.90	1118.20
Gerardo R Renuzio	X J LBJ A : H		RT OT ST O					8.00 1.00	8.00 1.50		16.00 2.50	35.750 53.628	572.00 134.07	26.281	X U 172 E O	485.20	706.07	706.07	46.93	89.06	35.81	171.80	534.27
Edward Ribo	X J OEA A : H	1710 USV FCN	RT OT ST O		8.00	8.00	8.00	8.00 .50	8.00 1.00		40.00 1.50	47.070 70.613	1882.81 105.92	30.013	X U 825 E O	1245.52	2024.03	1968.73	128.18	390.63	70.84	589.63	1434.40
Mathew Voorhees	X J OEA 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 16.00	47.070 70.610	1882.81 1129.76	33.691	X U 825 E O	1856.72	3012.57	3012.57	190.75	863.18	105.44	1159.37	1853.20

**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 #: 25
 Week Ending Date: 2015-08-29
 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							
				23	24	25	26	27	28	29													
Bryan Wayne	J WR 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	8.00	40.00 18.00	52.500 78.750	2100.00 1417.50	63.123	X U 825 E O	3601.10	5203.50	3517.50	222.24	1104.41	123.12	1449.77	3753.73	
Robert White	X J LBJ A : H	1810 PIP GAF	RT OT ST O				8.00 1.00	8.00		18.00 1.00	35.750 53.630	572.00 53.63	28.280	X U 472 E O	440.78	1510.44	625.63	100.73	214.29	62.66	377.68	1132.76	

<u>Key:</u>
RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time U - Union E - Employee O - Other J - Journeyman A - Apprentice H - Helper
NOTE:
<ol style="list-style-type: none"> 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
2nd of September, 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

Kristen Jimenez
 Signature of Notary Public

9/2 , 20 15
 DATE

KRISTEN L JIMENEZ
 NOTARY PUBLIC OF NEW JERSEY
 My Commission Expires June 9, 2018
 Commission I.D. No. 2301436

**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 # **26** Week Ending Date **2015-09-05** 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							
				30	31	1	2	3	4	5													

Klint Groves	X A : H	J CPF	RT OT ST O	8.00 .50	8.00	8.00 1.00	8.00 1.00	8.00		40.00 2.50	61.220 76.832	2048.80 192.08	29.957	X E O	U 254	1273.1 7	2240.88	2240.88	138.93	464.36	224.09	827.38	1413.50
Amando Gutierrez	A : H	J WDH	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	43.571 65.360	1742.82 653.60	35.428	X E O	U 825	1771.6 0	2546.42	2396.42	161.99	616.28	83.87	762.14	1794.28
Charles Hatcher	A : H	J WD	RT OT ST O	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00			32.00 8.00	62.500 78.750	1680.00 630.00	66.928	X E O	U 825	2677.1 2	3690.00	2310.00	145.95	462.23	80.85	689.03	3000.97
Timothy Houlihan	X A : H	J LBS	RT OT ST O	8.00	8.00			4.00		20.00	36.451	729.01 0.00 0.00 776.50	26.430	X E O	U 472	528.60	2066.75	729.01	138.40	531.85	776.50	1446.75	820.00
Arnold Grant Jones	X A : H	J CPJ	RT OT ST O	8.00 .50	8.00	8.00 .50	8.00	8.00		40.00 1.00	44.540 66.820	1781.60 66.82	25.677	X E O	U 254	1052.7 5	1848.42	1848.42	114.60	292.82	184.84	592.26	1256.16

1510
VXL
VDS

**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 # 26
Week Ending Date 2015-09-05
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			Gross Amt Earned	Taxable Gross Wages	FICA	Withholding tax	Other	Total Deductions	Net
				SU	MO	TU	WE	TH	FR	SA																Hourly Rate	Paid To (Local # If Union Is checked)	Total Paid							
30	31	1	2	3	4	5																													

Luis F. Pereira	X	J LBJ A : H	RT OT ST O	8.00 1.00	8.00	8.00 1.00				24.00 2.00	36.083 54.005	866.00 108.01 0.00 39.95	26.443	X	U 472	687.53	974.01	974.01	66.09	145.51	39.95	250.85	723.16
Nick Pietrosco	X	J LBJ A : H	RT OT ST O	8.00 .50	8.00	8.00	8.00	8.00		40.00 .50	36.288 53.820	1451.53 28.81 0.00 61.26	26.476	X	U 472	1072.36	1478.34	1478.34	99.05	259.09	61.26	419.40	1058.94
Gerardo R Ranzullo	X	J LBJ A : H	RT OT ST O	8.00 1.00	8.00	8.00 1.00				24.00 2.00	36.083 54.005	866.00 108.01 0.00 49.69	26.443	X	U 172	687.53	974.01	974.01	65.09	145.51	49.69	260.69	713.42
Edward Riho	X	J OEA A : H	RT OT ST O	8.00 .50	6.00 .50	8.00 1.00	8.00	8.00		38.00 2.00	47.070 70.820	1788.66 141.24 0.00 81.96	30.217	X	U 825	1208.66	2341.79	1929.90	148.27	496.27	81.96	726.50	1615.29
Michael Scalley	X	J OEA A : H	RT OT ST O				8.00	8.00		16.00	47.070	753.12 0.00 0.00 26.36	28.480	X	U 825	471.68	753.12	753.12	47.68	50.48	26.36	124.52	628.60

1710
USV
FCN

**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 # 26			Week Ending Date 2015-09-05			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 DCL 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
				30	31	1	2	3				4	5										

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
9th of September 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

9/9 , 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
Conti Enterprises, Inc.- EWR 154.183

Address
2045 LINCOLN HIGHWAY

EIN#

Payroll #
26

Week Ending Date
2015-09-05

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	U			MO	TU	WE	TH	FR	SA	Hourly Rate				Paid To (Local # If Union Is checked)	Total Paid	E								O																
																										30	31	1	2	3	4	5									
Albert Patrick Andrews	J	WDH		RT		8.00	8.00	8.00	8.00	8.00		40.00	43.570	1742.81	35.428	X	U	825	1771.40	2546.41	2396.41	151.99	515.76	83.87	751.62	1794.79															
	A :			OT		2.00	2.00	2.00	2.00	2.00		10.00	65.360	653.60																											
	H			ST										0.00																											
				O										83.87																											
Adelino H. DeMatos	X	J	LSJ		RT	8.00	8.00	8.00	8.00	8.00		40.00	36.150	1446.00	26.461	X	U	472	1085.73	2016.95	1500.38	134.32	443.40	80.72	658.44	1358.51															
	A :			OT				1.00				1.00	54.380	54.38																											
	H			ST										0.00																											
				O										80.72																											
Junior Elle	J	WDH		RT	8.00	8.00	8.00	8.00	8.00		40.00	43.571	1742.82	35.428	X	U	825	1771.40	2546.42	2396.42	151.99	514.11	83.87	749.97	1796.45																
	A :			OT	2.00	2.00	2.00	2.00	2.00		10.00	65.360	653.60																												
	H			ST										0.00																											
				O										83.87																											
Joseph Ertle III	J	F3		RT	8.00	8.00	8.00	8.00	8.00		40.00	38.400	1536.00	26.479	X	U	472	1165.07	1766.27	1766.27	117.55	471.00	70.56	659.11	1107.16																
	A :			OT	1.00	.50	1.50	1.00			4.00	57.588	230.27																												
	H			ST										0.00																											
				O										70.66																											
Gilberto Gada	X	J	OE A		RT	8.00	8.00	8.00	8.00	8.00		40.00	47.070	1892.80	30.182	X	U	825	1267.54	2024.02	2024.02	128.15	411.03	70.84	610.02	1414.00															
	A :			OT		1.00	1.00				2.00	70.610	141.22																												
	H			ST										0.00																											
				O										70.84																											

1715
TPT
UPH

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll

TO BE SUBMITTED WITH APPLICATION FOR PAYMENT

Name of Contractor or Subcontractor **ATI Services LLC** Address **PO Box 306 New Egypt, NJ 08533** EIN # _____

Payroll No. **3551-055** For Week Ending **9/5/15** Project & Location: **Newark Airport - Tank Farm - Tank repairs swingjoint replacement** PA Contract Number: **EWR154.183**

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 Time	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 (field dues, SU, med)	17 Total Deductions	18 Net
				Mon	Tue	Wed	Thu	Fri	Sat	Sun					Paid to (Local # if Union is circled)	Total Paid							
				U	E	O	U	E	O	U					E	O							
MARRERO, NERI	J NTD BOILERMAKER A _____ BM Helper Class 1, 2 or 3								24	22.61	542.64	21.96			527.04	542.64	542.64	36.96	45.43	100.67	183.06	359.58	
MONIZ, SAMEL DANIEL	J NTD BOILERMAKER A _____ BM Forman Class 1, 2 or 3								24	28.03	672.72	21.96			527.04	672.72	984.72 (incl sub)	75.32	154.24	71.29	300.85	683.87	
MUNYACO, PABLO	J NTD BOILERMAKER A _____ BM Helper Class 1, 2 or 3								16	22.61	361.76	21.96			351.36	361.76	361.76	23.12	7.33	78.48	108.93	252.83	
PRESTON, DENNIS	J NTD BOILERMAKER A _____ BM Mechanic Class 1, 2 or 3								24	26.6	638.4	21.96			527.04	638.4	908.40 (incl sub)	64.94	120.28	116.79	302.01	606.39	
	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:

- 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 JERALYN H LANG 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.

Cheryl Moniz
 Print Name Officer/Designee

[Signature]
 Signature

10/12/15
 Date

Sworn to before me, this day
7 of Oct, 2015

JERALYN H LANG
 Notary Public
 State of New Jersey
 My Commission Expires Feb. 8, 2017

[Signature]
 Signature of Notary Public

Statement of Compliance

I do hereby state:

1. That I, CHERYL MONIZ (Name of Signatory), PRESIDENT (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by ATI Services (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 Craft (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 **ATI Services LLC** Address **PO Box 306 New Egypt, NJ 08533** EIN # _____
 Payroll No. **4172-055** For Week Ending **9/12/15** Project & Location: **Newark Airport - Tank Farm - Tank repairs swingjoint replacement** PA Contract Number: **EW154.183**

1 Employees Name, Address, and SS. No. (last 4 digits)	2 Let Trade & Circle Work Classification (Journeyman or Apprentice / Class 1,2,3)	3 SWAC or TWICID # If Listed	4 Time	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 (field dues, SU, med)	17 Total Deductions	18 Net
				Mon	Tue	Wed	Thu	Fri	Sat	Sun					Paid to (Local # If Union Is Circled)	Total Paid							
				A	O	S	T	U	E	O													
MARRERO, NERI	J HTD BOILERMAKER		A							8	22.61	180.88	21.96	U	B	M	N						
	A		O							1	33.915	33.915	26.65	E									
	BM Helper		S																				
	Class 1, 2 or 3		T																				
													202.33	214.795	214.795	11.88	3.42	75.345	90.645	124.15			
MONIZ, SAMEL DANIEL	J HTD BOILERMAKER		A							8	28.03	224.24	21.96	U	B	M	N						
	A		O							1	42.045	42.045	26.65	E									
	BM Foreman		S																				
	Class 1, 2 or 3		T																				
													175.68	224.24	370.29 (incl sub)	28.33	40.04	22.36	90.73	279.56			
MUNYACO, PABLO	J HTD BOILERMAKER		A							8	22.61	180.88	21.96	U	B	M	N						
	A		O							1	33.915	33.915	26.65	E									
	BM Helper		S																				
	Class 1, 2 or 3		T																				
													202.33	214.795	214.795	11.88	4	70.765	85.645	128.15			
PRESTON, DENNIS	J HTD BOILERMAKER		A							8	26.6	212.8	21.96	U	B	M	N						
	A		O							1	39.9	39.9	26.65	E									
	BM Mechanic		S																				
	Class 1, 2 or 3		T																				
													202.33	252.7	342.7 (incl sub)	21.66	26.98	77.9	126.54	216.16			

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
7 of Oct, 2015

I, CHERYL M. J. ... 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.

CHERYL M. J. ...
 Print Name Officer/Designee
[Signature]
 Signature
10/12/15
 Date

JERALYN H LANG
 Notary Public
 State of New Jersey
 My Commission Expires Feb 8, 2017

[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 Conti Enterprises, Inc.- EWR 154.183						Address 2045 LINCOLN HIGHWAY						EIN #											
Payroll # 27			Week Ending Date 2015-09-12			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
				6	7	8	9				10	11	12										

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
23rd of September, 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

9/23, 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
Conti Enterprises, Inc.- EWR 154.183

Address
2045 LINCOLN HIGHWAY

E I N #

Payroll #
27

Week Ending Date
2015-09-12

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 Eamed	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									
				6	7	8	9	10	11	12															
Albert Patrick Andrews	J WDH A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	43.570	1742.80	36.370	X U 825 E O	2036.7 2	2938.56	2788.56	176.86	646.32	97.60	920.78	2017.78	
Jaime Fernando Carvalho	X J LBJ A : H		RT OT ST O			8.00						8.00	36.250	290.00	26.530	X U 472 E O	238.77	1280.83	344.38	85.73	163.32	52.42	291.47	989.36	
Adelino H. DeMatos	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	36.250	1450.00	26.530	X U 472 E O	1379.5 6	2102.51	2102.51	140.02	473.37	83.76	697.15	1405.36	
Junior Elio	J WDH A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	43.670	1742.80	36.370	X U 825 E O	2036.7 2	2938.56	2788.56	176.86	845.58	97.60	920.04	2018.52	
Joseph Ertle III	J F3 A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	38.500	1540.00	26.530	X U 472 E O	1061.2 0	1540.00	1540.00	102.92	390.25	62.50	655.67	884.33	

**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 #: 27
Week Ending Date: 2015-09-12
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							
				6	7	8	9	10	11	12													

Gilberto Geada	X J OEA A : H	1715 TPT UPH	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	47.070	1882.80	33.200	X U 825	1776.18	2836.05	2836.05	179.57	681.08	99.26	959.91	1876.14
Klint Groves	X J CPF A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	61.220	2048.80	29.113	X U 254	1164.53	2048.80	2048.80	127.03	400.38	204.88	732.29	1316.51
Armando Gutierrez	J WDH A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	43.570	1742.81	36.370	X U 825	2036.72	2938.57	2788.57	176.86	646.33	97.60	820.79	2017.78
Charles Halcher	J WD A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	62.500	2100.00	63.191	X U 825	3538.72	6012.00	3360.00	212.29	804.47	117.60	1134.38	3877.64
Timothy Houlihan	X J LBS A : H	1510 VXL VDS	RT OT ST O	8.00	7.00	7.00	6.50	8.00			36.50	36.650	1337.73	26.530	X U 472	1061.20	1658.43	1630.15	111.81	384.35	761.79	1257.95	400.48

**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 #
27

Week Ending Date
2015-09-12

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									
				6	7	8	9	10	11	12															

Gerardo R Ronzulo	X	J LBJ A : H	RT OT ST O	8.00							8.00	36.250	280.00 0.00 0.00 14.95	28.530	X	U 172	212.24	290.00	290.00	19.46	18.53	14.95	62.94	237.06
Edward Ritto	X	J OEA A : H	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	47.070	1882.80 917.95 0.00 98.02	33.096	X	U 825	1754.0 8	2800.75	2800.75	177.34	648.63	98.02	924.18	1876.66
Michael Scalley	X	J OEA A : H	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	47.070	1882.80 141.22 0.00 70.84	30.182	X	U 825	1267.6 4	2024.02	2024.02	128.16	324.84	70.84	523.84	1500.18
Matthew Voorhees	X	J OEA A : H	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	47.070	1882.81 1129.76 0.00 105.44	33.691	X	U 825	1886.7 2	3012.57	3012.57	190.74	863.17	105.44	1159.35	1853.22
Bryan Wayne		J WD A : H	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	52.500	2100.00 1260.00 0.00 117.60	63.191	X	U 825	3538.7 2	6012.00	3360.00	212.28	1034.92	117.60	1364.81	3647.19

**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 #: **27** Week Ending Date: **2015-09-12** 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									
				U	7	8	9	10	11	12															

Robert White	X	J LBJ	RT	8.00	8.00	8.00	8.00	8.00		40.00	36.250	1450.00	26.530	X	U 472	1061.20	1450.00	1450.00	97.34	202.98	60.25	360.57	1089.43
		A :	OT									0.00			E								
		H	ST									0.00			O								
			O									60.25											

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**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 # 27		Week Ending Date 2015-09-12		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	M	T	W				T	F	S								Hourly Rate	Paid To (Local # If Union is checked)	Total Paid
				6	7	8	9				10	11	12										

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
16th of September, 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

Elizabeth Russo 9/16 , 2015
Signature of Notary Public 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, Cheryl Moore (Name of Signatory), President (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by ATI Services (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 Cash (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 **Ferreira Construction Co** Address **31 Tannery Rd, Banckburg, NJ 08876** EIN #

Payroll No. **24** For Week Ending **9/13/15** Project & Location: **ENR154.183 Aviation Fuel System Modifications, Newark, NJ** PA Contract Number: **69950373**

1 Employee Name, Address, and SS. No. (last 4 digits)	2 List Trade & Grade Work Classification (See system on Appendix / Class 1,2,3)	3 SWAC or TWIC ID # if listed	5 Day and Date							6 Total Hrs	7 Base Hourly Rate of Pay	8 Total Base Pay	9 Hourly Rate	10 Supplemental Benefits		11 Total Paid	12 Gross Area Earned	13 Tenable Gross Wages	14 FICA	15 With- holding Tax	16 Other	17 Total Deductions	18 Net						
			Day and Date											Supplemental Benefits															
			Mon	Tue	Wed	Thu	Fri	Sat	Sun					Paid to (Local # if Union is deduct)	Total Paid														
Scott Peiffer	J Laborer - Foreman A _____ Class 1, 2 or 3	1514-JEBIMW	1										U 4 7 2	\$803.68	\$2,064.89		\$157.95	\$360.00	\$195.97	\$713.93	\$1,350.96								
			2																										
			3			0.5	0.5	0.5			1.5	\$59.25	\$88.89	\$25.14															
			4																										
Ramon Ramos	J Laborer A _____ Class 1, 2 or 3	TIDB	1										U 4 7 2	\$600.31	\$1,272.80		\$97.37	\$79.14	\$144.62	\$360.72	\$912.60								
			2																										
			3																										
			4																										
David Schlicking	J_OPERATOR A _____ Class 1, 2 or 3	TIDB	1										U 8 2 5	\$973.80	\$1,994.91		\$152.62	\$485.09	\$109.87	\$747.58	\$1,247.33								
			2																										
			3																										
			4																										
Terry Swain	J Laborer A _____ Class 1, 2 or 3	TIDB	1										U 4 7 2	\$599.64	\$1,575.60		\$120.53	\$205.86	\$180.39	\$566.78	\$1,068.82								
			2																										
			3																										
			4																										

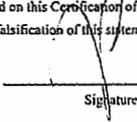
Key:
 RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time
 U - Union E - Employee O - Other
 J - Journeyman A - Apprentice H - Helper

Sworn to before me, this day
2 of Oct, 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.

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/Designer


 Signature

10/2/2015
 Date


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

Statement of Compliance

I do hereby state:

1. That I, Cheryl Mowitz (Name of Signatory), President (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by ATI Services (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 (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

Statement of Compliance

I do hereby state:

1. That I, C Meryl Munoz (Name of Signatory), President (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by AT Services (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 Conk (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

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Manager (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.

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c. EXCEPTIONS:

EXCEPTION (CRAFT)

EXPLANATION

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Manager (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.

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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 #
28

Week Ending Date
2015-09-19

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	U	MO	TU	WE	TH	FR				SA	Hourly Rate	Paid To (Local # If Union Is checked)								Total Paid	
				13	14	15	16	17	18	19															
Albert Patrick Andrews	J WDH A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	43.570	1742.80	36.769	X U 825 E O	2169.40	3134.64	2984.64	189.29	712.96	104.46	1006.71	2127.93	
Adelino H. DeMatos	X J LBJ A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00	.50	40.00	38.250	1450.00	26.530	X U 472 E O	1074.48	1477.19	1477.19	99.12	259.31	61.23	419.66	1057.53		
Michael R DePaola	X J LBJ A : H		RT OT ST O		8.00	8.00					16.00	36.250	580.00	26.530	X U 472 E O	451.01	1558.76	634.38	104.45	405.39	64.17	574.01	984.75		
Vincent DePaola	X J LBJ A : H		RT OT ST O		8.00	1.00					8.00	36.250	290.00	26.530	X U 472 E O	238.77	1903.57	344.38	126.95	323.09	76.39	528.43	1377.14		
Junior Elia	J WDH A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	43.570	1742.80	35.249	X U 825 E O	1727.20	2481.04	2331.04	147.84	473.59	81.59	703.02	1778.02		

**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 # 28 Week Ending Date 2015-09-19 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							
				13	14	15	16	17	18	19													

Joseph Erie III	J FB A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	1.50	1.00		40.00	38.500	1540.00	26.530	X	U 472	1127.64	1684.39	1684.39	112.34	442.21	67.61	622.16	1062.23
Gilberto Geada	X J OEA A : H	1715 TPT UPH	RT OT ST O	8.00	8.00	8.00	8.00	8.00	1.50	.50		40.00	47.070	1882.80	30.347	X	U 625	1289.76	2059.34	2059.34	130.39	422.78	72.08	625.25	1434.09
Klint Groves	X J CPF A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	.50	1.00		40.00	61.220	2048.80	29.286	X	U 254	1215.37	2138.44	2138.44	132.58	430.22	213.84	776.64	1361.80
Armando Gutierrez	J WDH A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	3.00	2.00	2.00	40.00	43.570	1742.80	38.769	X	U 825	2169.40	3134.64	2984.64	189.29	712.96	104.48	1006.71	2127.93
Charles Halcher	J WD A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	3.00	2.00	2.00	40.00	62.500	2100.00	63.092	X	U 825	3722.60	5289.25	3596.25	227.21	888.22	125.87	1241.30	4057.95

**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 #
28

Week Ending Date
2015-09-19

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									
				13	14	15	16	17	18	19															

Timothy Houlihan	X A : H	J LBS 1510 VXL VDS	RT OT ST O	8.00 1.00	8.00	8.00	8.00	8.00	8.00	1.50	40.00 2.50	36.650 54.976	1466.01 137.44 0.00 775.61	26.630	X U 472	1127.5 4	2043.26	1603.45	136.97	523.47	775.61	1436.05	607.21
Arnold Grant Jones	X A : H	J CPJ	RT OT ST O	8.00	8.00	8.00	8.00	8.00			40.00	44.540	1781.60 0.00 0.00 178.16	25.372	X U 254	1014.6 9	1781.60	1781.60	110.46	276.04	178.16	664.66	1216.94
Carlos A. Lamego	X A : H	J LBJ 1710 SLA WPG	RT OT ST O	8.00	8.00	8.00	8.00	8.00	.50	8.00	40.00 8.50	36.250 54.375	1450.00 462.19 0.00 76.90	26.530	X U 472	1286.7 2	1912.19	1912.19	127.58	491.13	76.90	695.61	1216.58
Kevin Lamego	X A : H	J LBJ 1510 XFM ZMY	RT OT ST O	8.00	8.00	8.00	8.00	8.00			40.00	36.250	1450.00 0.00 0.00 60.25	26.530	X U 472	1061.2 0	1450.00	1450.00	97.34	388.59	60.25	548.18	903.82
Angel Laureano	X A : H	J LBJ	RT OT ST O	8.00 3.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.00	8.00 6.00		40.00 19.00	36.250 54.376	1450.00 1033.14 0.00 87.48	26.530	X U 472	1565.2 7	2483.14	2483.14	164.93	779.37	97.48	1041.78	1441.36

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 #: 28
 Week Ending Date: 2015-09-19
 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							
				13	14	15	16	17	18	19													

Edward Rilho	X J OEA A : H	1710 USV FCN	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	47.070	1882.80	29.480	X U 825 E O	1179.2 0	2871.27	1882.80	181.80	672.53	100.50	954.83	1816.44
Michael Scalley	X J OEA A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	47.070	1882.80	29.480	X U 825 E O	1179.2 0	1882.80	1882.80	119.21	283.54	65.89	468.64	1414.16
Matthew Voorhees	X J OEA A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	7.00	40.00	47.070	1882.80	33.785	X U 825 E O	1908.8 4	3047.87	3047.87	182.99	862.47	106.68	1162.14	1885.73
Bryan Wayne	J WD A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	52.500	2100.00	63.385	X U 825 E O	3232.6 4	4533.25	2966.25	187.41	888.66	103.82	1179.89	3353.36
Robert White	X J LB-J A : H	1810 PIP GAP	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	36.250	1450.00	26.530	X U 472 E O	1061.2 0	1450.00	1450.00	97.34	202.99	60.25	360.58	1089.42

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Manager (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 # 29
 Week Ending Date 2015-09-26
 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							
				20	21	22	23	24	25	26													

Kini Groves	X A : H	J CPF	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	51.220	2048.80	30.114	X E O	U 254	1294.9 0	2279.30	2279.30	141.32	465.32	227.93	834.57	1444.73
Armando Gutierrez	A : H	J WDH	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	43.571	1742.83	35.515	X E O	U 825	1783.5 2	2579.11	2429.11	154.06	526.84	85.02	765.72	1813.39
Charles Hatcher	A : H	J WD	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	62.500	2100.00	63.406	X E O	U 825	3202.0 2	4485.39	2926.89	184.93	661.21	102.44	948.58	3536.81
Timothy Houlihan	X A : H	J LBS	RT OT ST O	6.50	6.00	8.00			8.00	20.50	36.650	751.33	26.530	X E O	U 472	835.68	2070.74	1358.06	138.76	534.02	776.60	1449.38	621.36
Arnold Grant Jones	X A : H	J CPJ	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	44.540	1781.60	25.966	X E O	U 254	1090.5 8	1915.22	1915.22	118.74	315.08	191.52	625.34	1289.88

1510
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**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 #: 29
Week Ending Date: 2015-09-26
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							
				20	21	22	23	24	25	26													

Carlos A. Lamago	X J LBJ A : H	1710 SLA WPG	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	38.250	1450.00	28.530	X	U 472	1392.34	2129.69	2129.69	141.81	674.78	84.74	801.33	1328.36
Kevin Lamago	X J LBJ A : H	1510 XFM ZMY	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	36.250	1450.00	26.530	X	U 472	1353.03	2048.14	2048.14	136.48	612.07	81.80	830.35	1217.79
Angel Laureano	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	36.251	1450.03	26.530	X	U 472	1339.78	2020.97	2020.97	134.69	601.62	80.82	817.13	1203.84
David Marconi	X J OEA A : H		RT OT ST O	8.00	8.00	6.50	3.00	8.00	8.00	8.00	33.50	44.406	1487.60	33.368	X	U 825	1518.24	2663.57	2282.42	168.88	624.86	93.23	886.97	1776.70
John F McGuire	X J OEB A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	45.480	1819.20	30.182	X	U 825	1267.64	1955.64	1955.64	123.91	368.37	68.45	560.73	1394.91

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
 E.I.N #:

Payroll #: 29
 Week Ending Date: 2015-09-26
 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													

Tyrone G Moore	J WDH A : H		RT OT ST O		8.00 2.00						8.00 2.00	43.570 65.360	348.56 130.72	47.428	X U E O	825	474.28	629.28	479.28	30.40	76.28	16.78	122.46	506.82
Nick Pietrolacovo	X J LBJ A : H		RT OT ST O	8.00	8.00 1.00	8.00 2.00	8.00	8.00	1.50	8.00	40.00 12.50	36.250 54.375	1450.00 679.69	26.530	X U E O	472	1992.8 4	2129.69	2129.69	141.81	482.69	84.74	709.24	1420.45
Edward Rithe	X J OEA A : H	1710 USV FCN	RT OT ST O	8.00	8.00	8.00	8.00	8.00	1.50	8.00	40.00 9.50	47.070 70.811	1882.80 670.80	32.309	X U E O	825	1599.3 0	2553.60	2553.60	161.69	566.68	89.38	817.75	1735.85
Michael Scalley	X J OEA A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		7.00	40.00 7.00	47.070 70.810	1882.80 494.27	31.676	X U E O	825	1489.7 6	2377.07	2377.07	150.51	444.84	83.20	678.65	1699.42
Matthew Voorhees	X J OEA A : H		RT OT ST O		8.00 2.00	8.00 2.00	8.00	8.00	2.00		32.00 6.00	47.071 70.812	1506.26 423.67	31.807	X U E O	825	1203.6 8	1929.93	1929.93	122.19	440.41	67.55	630.15	1299.78

**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 # 29				Week Ending Date 2015-09-26				Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ						FA 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
				20	21	22	23	24	25				26										

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
30th of September, 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
Elizabeth Russo Signature of Notary Public
9/30, 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 Manager (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 #: 30
Week Ending Date: 2015-10-03
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							
				27	28	29	30	1	2	3													
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 2.50	8.00 2.00	8.00 8.00	40.00 18.50	43.570 65.360	1742.80 1274.52 0.00 105.61	36.832	X U 825 E O	2191.50	3167.32	3017.32	191.37	724.16	105.61	1021.13	2146.19
Adelino H. DeMatos	X J LBJ A : H		RT OT ST O		8.00 1.00	8.00	8.00 1.00	8.00 1.50	8.00		40.00 3.50	36.250 54.380	1450.00 190.33 0.00 67.11	26.530	X U 472 E O	1154.07	1640.33	1640.33	109.79	314.63	67.11	491.53	1148.80
Junior Eile	J WDH A : H		RT OT ST O		8.00 6.00	8.00 2.00	8.00 2.00	8.00 2.50	8.00 2.00	9.00	40.00 23.50	43.570 65.360	1742.80 1535.96 0.00 114.75	37.297	X U 825 E O	2369.38	3428.76	3278.76	207.95	798.83	114.75	1119.53	2309.23
Joseph Erlio III	J F3 A : H		RT OT ST O		8.00	8.00 .50	8.00 1.00	8.00	8.00		40.00 1.50	38.500 57.753	1540.00 86.63 0.00 65.57	26.530	X U 472 E O	1101.01	1626.63	1626.63	108.57	421.43	65.57	585.57	1031.06
Gilberto Geada	X J OEA A : H	1715 TPT LPH	RT OT ST O		8.00 2.00	8.00 1.00	8.00 2.00	8.00 1.50	8.00	8.00	40.00 15.50	47.070 70.610	1882.80 1094.46 0.00 104.21	33.597	X U 825 E O	1854.62	2977.26	2977.26	188.51	729.31	104.21	1022.03	1955.23

THE PORT AUTHORITY OF NY & NJ

Certification of Payroll To Be Submitted With Application For Payment

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

Payroll # 30
 Week Ending Date 2015-10-03
 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	U	MO	TU	WE	TH	FR				SA	Hourly Rate	Paid To (Local # if Union Is checked)								Total Paid
				27	28	29	30	1	2	3														

Klint Groves	X J CPF A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	61.220	2048.80	28.463	X U 254 E O	1207.98	2125.83	2125.83	131.79	409.71	212.57	754.07	1371.56
Armando Gutierrez	J WDH A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	43.570	1742.81	36.832	X U 825 E O	2191.50	3167.33	3017.33	191.37	724.15	105.61	1021.13	2146.20
Charles Hatcher	J WD A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	52.500	2100.00	63.076	X U 825 E O	3753.00	5347.13	3635.63	229.70	901.84	127.25	1258.79	4088.34
Timothy Houlihan	X J LBS A : H	1510 VXL VBS	RT OT ST O	8.00	8.00	8.00	5.00		8.50	29.00	36.850	1062.85	26.530	X U 472 E O	1034.67	2070.74	1612.61	138.77	534.02	776.60	1449.39	621.35
Arnold Grant Jones	X J CPJ A : H		RT OT ST O	8.00	8.00	8.00	8.00	5.00		37.00	44.540	1647.98	25.701	X U 254 E O	976.63	1714.79	1714.79	106.32	260.46	171.48	538.26	1176.53

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 #: **30** Week Ending Date: **2015-10-03** 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							
				27	28	29	30	1	2	3													

Carlos A. Lamego	X A : H	J LBJ 1710 SLA PWG	RT OT ST O	8.00 2.00	8.00 1.00	8.00 2.00	8.00 1.50	8.00		40.00 6.50	36.250 54.377	1450.00 353.45 0.00 72.99	26.530	X E O	U 472	1233.6 6	1803.45	1803.45	120.46	451.63	72.99	645.08	1168.37
Kevin Lamego	X A : H	J LBJ 1510 XFM ZMY	RT OT ST O	8.00	8.00	8.00 1.00	8.00 1.50	8.00		40.00 2.50	36.250 54.380	1450.00 135.95 0.00 65.15	26.530	X E O	U 472	1127.5 4	1585.95	1585.95	106.23	436.69	65.15	607.97	977.98
Angel Laureano	X A : H	J LBJ	RT OT ST O	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.50	8.00 2.00	9.00	40.00 19.50	36.250 54.376	1450.01 1060.33 0.00 98.46	26.530	X E O	U 472	1578.5 5	2510.34	2510.34	168.71	789.84	98.46	1055.01	1455.33
David Marconi	X A : H	J OEC	RT OT ST O	1.00 .50	8.00 2.00	1.00 2.50		2.00 .50		12.00 5.50	43.570 65.360	522.84 359.48 0.00 78.16	34.111	X E O	U 825	596.34	2233.02	882.32	141.63	481.78	78.16	701.55	1531.47
John F McGuire	X A : H	J OEB	RT OT ST O	8.00	8.00 .50	8.00	8.00	8.00		40.00 .50	45.480 68.220	1819.20 34.11 0.00 64.87	28.662	X E O	U 825	1201.3 2	1853.31	1853.31	117.43	334.33	64.87	516.63	1336.68

**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 #: 30
Week Ending Date: 2015-10-03
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							
				27	28	29	30	1	2	3													

Nick Pietrolacovo	X A : H	J LBJ	RT OT ST O	8.00 1.00	8.00	8.00	8.00	8.00	8.00	40.00 3.50	36.250 64.380	1450.00 190.33	26.530	X U 472 E O	1154.0 7	1640.33	1640.33	109.79	314.63	67.11	491.53	1148.80
Edward Rilho	X A : H	J OEA	RT OT ST O	8.00 2.00	8.00 3.00	8.00 2.50	8.00 2.50	8.00	8.00	40.00 10.00	47.070 70.611	1882.80 706.11	32.428	X U 825 E O	1621.4 0	2588.91	2588.91	163.92	578.40	90.61	632.93	1755.98
Michael Scalley	X A : H	J OEA	RT OT ST O	8.00	8.00 .50	8.00	8.00	8.00	8.00	40.00 2.50	47.070 70.612	1882.80 176.53	30.347	X U 825 E O	1289.7 6	2058.33	2058.33	130.39	336.85	72.08	539.32	1620.01
Patrick A. Shreeves	A : H	J WDH	RT OT ST O	8.00 2.00	8.00 2.00	8.00 2.00	8.00 2.50	8.00	8.00	40.00 19.50	43.570 65.360	1742.80 1274.52	36.832	X U 825 E O	2181.5 0	3167.32	3017.32	191.37	747.77	105.61	1044.75	2122.57
Matthew Voorhees	X A : H	J OEA	RT OT ST O	8.00 2.00	8.00 2.00	8.00	8.00	8.00	8.00	40.00 17.50	47.070 70.610	1882.81 1235.68	33.988	X U 825 E O	1953.0 5	3118.49	3118.49	197.46	879.05	109.14	1185.65	1932.84

**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 # 30
Week Ending Date 2015-10-03
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									
				U	28	29	30	1	2	3															

Bryan Wayne	J WD A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	52,500	2100.00	83.076	X U 825	3753.00	5347.13	3635.63	229.71	1137.31	127.25	1494.27	3852.86
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	36,250	1450.00	26.530	X U 472	1101.01	1531.57	1531.57	102.58	221.40	63.19	387.27	1144.30

**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 # 30		Week Ending Date 2015-10-03		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							
				U	28	29	30	1	2	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:

- 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
7th of October, 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

10/7, 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 Manager (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 #: 31
 Week Ending Date: 2015-10-10
 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	5	6	7	8	9	10													

Carlos A. Lamego	X A: H	J LBJ 1710 SLA PWG	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	36.250	1450.00	26.530	X	U 472	1326.50	1993.75	1993.75	132.91	522.49	79.84	735.24	1258.51
Kevin Lamego	X A: H	J LBJ 1510 XFM ZMY	RT OT ST O	8.00	8.00	8.00		8.00	8.00	8.00	32.00	36.250	1160.00	26.530	X	U 472	862.24	1504.38	1187.19	100.90	407.80	62.21	570.91	933.47
Angel Laureano	X A: H	J LBJ	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	36.250	1450.01	26.530	X	U 472	1326.50	1993.77	1993.77	132.91	591.16	79.84	803.91	1189.86
David Marconi	X A: H	J OEC	RT OT ST O	6.00	2.00				5.00	2.50	11.00	43.570	479.27	34.086	X	U 825	545.38	2527.12	806.07	160.28	579.68	88.45	828.41	1698.71
John F McGuire	X A: H	J OEB	RT OT ST O	8.00	8.00	8.00	8.00	8.00		8.00	40.00	45.480	1819.20	31.937	X	U 825	1532.95	2364.96	2364.96	149.86	504.54	82.77	737.17	1627.79

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 #: 31
 Week Ending Date: 2015-10-10
 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							
				4	5	6	7	8	9	10													

Nick Piestolicovo	X J LBJ A : H		RT OT ST O	8.00	8.00			8.00		24.00	36.250 54.380	670.00 27.19 0.00 65.15	26.528	X U 472	649.94	1565.95	697.19	106.24	295.96	65.15	467.35	1118.60
Edward Raho	X J DEA A : H	M10 USV FCN	RT OT ST O	8.00	8.00			8.00	8.00	24.00	47.070 70.611	1129.69 600.19 0.00 68.14	33.335	X U 825	1083.4 0	2518.31	1729.88	159.45	554.94	88.14	802.53	1715.78
Michael Scailley	X J OEA A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	47.070 70.620	1882.81 35.31 0.00 67.13	28.662	X U 825	1201.3 2	1916.12	1916.12	121.45	291.94	67.13	480.52	1437.60
Patrick A. Shreeves	J WDH A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	43.570 65.360	1742.80 653.60 0.00 83.67	35.428	X U 825	1771.4 0	2546.40	2396.40	151.98	534.48	83.67	770.33	1776.07
Matthew Voorhees	X J OEA A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	47.070 70.610	1882.80 796.10 0.00 90.61	32.428	X U 825	1621.4 0	2588.90	2588.90	163.92	661.92	90.61	936.45	1652.45

**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 #: 31
 Week Ending Date: 2015-10-10
 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	U	MO	TU	WE	TH	FR				SA	Hourly Rate	Paid To (Local # if Union is checked)								Total Paid	
				4	5	6	7	8	9	10															

Bryan Wayne	J WD A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	52.500	2100.00	63.428	X	U 825	3171.4 0	4437.50	2887.50	182.43	859.40	101.07	1142.90	3294.50
Robert White	X J LBJ A : H	1810 PIP GAF	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	36.250	1450.00	26.530	X	U 472	1273.4 4	1885.00	1885.00	125.80	317.04	75.93	518.77	1366.23

**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 # 31			Week Ending Date 2015-10-10			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 Eamed	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	
				4	5	6	7	8	9				10											

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
14th of October, 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

10/14, 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 <input type="checkbox"/> or Subcontractor <input checked="" type="checkbox"/>		ATI Services LLC		Address PD Box 306 New Egypt, NJ 08533										EIN #										
Payroll No. -6110-055		For Week Ending 10/10/15		Project & Location: Newark Airport - Tank Farm - Tank repairs swingjoint replacement										PA Contract Number: EWR154.183										
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 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 Circled)	Total Paid	Gross Amt Earned	Taxable Gross Wages	FICA	With-holding Tax	Other (field dues, SU, med)	Total Deductions	Net	
MARRERO, NERI	J NTD BOILERMAKER A _____ BM Helper Class 1, 2 or 3		R T O T S T G T									22.61	0	21.96	U B M N									
MONIZ, SAMEL DANIEL	J NTD BOILERMAKER A _____ BM Forman Class 1, 2 or 3		R T O T S T G T									28.03	0	21.96	U B M N									
MUNYACO, PABLO	J NTD BOILERMAKER A _____ BM Helper Class 1, 2 or 3		R T O T S T G T		8	8	8	8	8	8	40	22.61	904.4	21.96	U B M N									
PRESTON, DENNIS	J NTD BOILERMAKER A _____ BM Mechanic Class 1, 2 or 3		R T O T S T G T		8	8	8	8	8		40	26.6	1064	21.96	U B M N									
GRIMM, THOMAS	J NTD BOILERMAKER A _____ BM Mechanic Class 1, 2 or 3		R T O T S T G T									26.6	0	21.96	U B M N									
<p>Key: RT - Regular Time OT - Overtime ST - Shift Time GT - Guaranteed Time U - Union E - Employee O - Other J - Journeyman A - Apprentice H - Helper</p>																								

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 CHERYL MONIZ 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.

CHERYL MONIZ Print Name Officer/Designee
[Signature] Signature
11/13/15 Date

Sworn to before me, this day
3 of Nov, 2015

JERALYN H LANG
Notary Public
State of New Jersey
My Commission Expires Feb. 8, 2017

[Signature]
Signature of Notary Public

Statement of Compliance

I do hereby state:

1. That I, Cheryl Moore (Name of Signatory), President (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by ATI Service (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 ATI (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 ATI Services LLC Address PO Box 306 New Egypt, NJ 08533 EIN #

Payroll No. -6110-055 For Week Ending 10/17/15 Project & Location: Newark Airport - Tank Farm - Tank repairs swingjoint replacement PA Contract Number: EWR154.183

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								
MARRERO, NERI	J NTD BOILERMAKER A BM Helper Class 1, 2 or 3										22.61	0	21.96	U B M N - E O										
MONIZ, SAMEL DANIEL,	J NTD BOILERMAKER BM Forman Class 1, 2 or 3				8					8	28.03	224.24	21.96	U B M N - E O										
MUNYACO, PABLO	J NTD BOILERMAKER A BM Helper Class 1, 2 or 3				8					8	22.61	180.88	21.96	U B M N - E O										
PRESTON, DENNIS	J NTD BOILERMAKER A BM Mechanic Class 1, 2 or 3										26.6	0	21.96	U B M N - E O										
GRIMM, THOMAS	J NTD BOILERMAKER A BM Mechanic Class 1, 2 or 3										26.6	0	21.96	U B M N - E 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 CHELYE MONIZ 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.

CHELYE MONIZ Print Name Officer/Designee
[Signature] Signature
11/31/15 Date

Sworn to before me, this day
3 of Nov, 2015

JERALYN H LANG
 Notary Public
 State of New Jersey
 My Commission Expires Feb-8, 2017

[Signature]
 Signature of Notary Public

Statement of Compliance

I do hereby state:

1. That I, Cheryl Mugiz (Name of Signatory), President (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by ATI Services (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 ATI (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>

Statement of Compliance

I do hereby state:

1. That I, Cheryl M. ... (Name of Signatory), President (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by ATI (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 ATI (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>

Statement of Compliance

I do hereby state:

1. That I, Brendey Davis (Name of Signatory), Payroll Manager (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Comb 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 Comb 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 # 32
 Week Ending Date 2015-10-17
 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							
				11	12	13	14	15	16	17													
Alberl Patrick Andrews	J WDH A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	43.570	1742.60	36.641	X U 825	2125.16	3069.28	2919.28	185.14	690.59	102.18	977.91	2091.37
Adelino H. DeMatos	X J LBJ A : H		RT OT ST O			8.00					8.00	36.251	290.01	26.534	X U 472	212.27	1295.96	290.01	86.76	217.44	53.10	357.30	938.66
Junior Elle	J WDH A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	43.570	1742.80	36.641	X U 825	2125.16	3069.28	2919.28	185.15	670.01	102.18	957.34	2111.94
Joseph Erle III	J FJ A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	38.500	1540.00	26.530	X U 472	1114.26	1655.52	1655.52	110.45	431.84	66.59	608.88	1046.64
Gilberto Gauda	X J DEA A : H	1715 TPT UPH	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	47.070	1892.81	30.182	X U 825	1267.64	2024.03	2024.03	128.15	411.04	70.84	610.03	1414.00

**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 #: 32
Week Ending Date: 2015-10-17
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 Aml 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							
				U	11	12	13	14	15	16													

Carlos A. Lamego	X A : H	J LBJ 1710 SLA PNG	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	36.250	1450.01	26.530	X U 472 E O	1114.2 5	1558.77	1558.77	104.46	365.28	64.17	533.89	1024.88
Kevin Lamego	X A : H	J LBJ 1510 XFM ZMY	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	36.250	1450.00	26.530	X U 472 E O	1268.3 7	1939.38	1939.38	129.35	570.24	77.88	777.47	1161.91
Angel Laureano	X A : H	J LBJ	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	36.250	1450.00	26.530	X U 472 E O	1273.4 4	1885.01	1885.01	125.80	549.33	75.93	751.06	1133.95
David Marconi	X A : H	J DEC	RT OT ST O	1.50		8.00	6.50	2.50		16.50	43.571	806.07	29.485	X U 825 E O	545.48	1971.61	806.07	125.04	395.71	69.01	589.76	1381.85
John F McGuire	X A : H	J OEA	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	45.798	1831.92	29.662	X U 825 E O	1201.3 2	1866.03	1866.03	118.22	338.47	65.31	522.00	1344.03

**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 #: **32** Week Ending Date: **2015-10-17** 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							
				11	12	13	14	15	16	17													

Nick Pietrolacovo	X A : H	J LBJ	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	36.250	1450.00	26.530	X	U 472	1114.26	1558.76	1558.76	104.45	286.62	64.17	455.24	1103.62
Edward Riho	X A : H	J OEA	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	47.070	1882.80	32.428	X	U 825	1621.40	2588.90	2588.90	163.92	578.41	90.61	832.94	1755.96
Michael Scalley	X A : H	J OEA	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	47.070	1882.80	29.480	X	U 825	1179.20	1882.80	1882.80	119.22	283.54	65.89	468.65	1414.15
Patrick A. Shroevs	A : H	J WDH	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	43.570	1742.80	36.641	X	U 825	2125.16	3069.28	2918.28	185.15	713.44	102.18	1000.77	2068.51
Matthew Voorhes	X A : H	J OEA	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	47.070	1882.80	32.428	X	U 825	1621.40	2588.90	2588.90	163.92	681.91	90.61	936.44	1652.46

**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 # 32			Week Ending Date 2015-10-17			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							
				11	12	13	14	15	16	17													

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
21st of October, 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

10/21, 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 Manager (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 #: **33** Week Ending Date: **2015-10-24** 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									
				18	19	20	21	22	23	24															
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	43.570 65.360	1742.80 653.60	35.428	X E O	U 825 0	1771.4 0	2546.40	2396.40	151.99	515.75	83.87	751.61	1794.79	
Adalino H. DeMatos	X J LBJ A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00	1.50 1.00	8.00	40.00 10.50	36.250 54.377	1450.00 570.96	26.530	X E O	U 472 8	1339.7 8	2020.96	2020.96	134.70	445.36	80.82	660.88	1360.08
Junior Eile	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	43.570 65.360	1742.80 653.60	35.428	X E O	U 825 0	1771.4 0	2546.40	2396.40	151.98	495.34	83.87	731.19	1815.21	
Joseph Ertle III	J FJ A : H		RT OT ST O		8.00 1.00	8.00 .50	8.00 2.00	8.00 .50	8.00 .50	8.00	40.00 12.50	36.500 57.753	1540.00 721.91	26.530	X E O	U 472 4	1382.8 4	2261.91	2261.91	150.01	684.37	88.05	902.43	1359.48	
Giberto Geads	X J OEA A : H	1715 TPT UPH	RT OT ST O		8.00	8.00	8.00	8.00	8.00	8.00	40.00 13.00	47.070 70.610	1862.80 917.93	33.096	X E O	U 825 8	1754.0 8	2800.73	2800.73	177.34	669.22	98.02	944.58	1856.15	

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 #: **33** Week Ending Date: **2015-10-24** 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							
				18	19	20	21	22	23	24													

Klint Groves	X J CPF A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	51.220	2048.80	29.796	X U 254 E O	1251.45	2202.47	2202.47	136.55	434.72	220.24	791.51	1410.96
Amando Gutierrez	J WDH A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	43.570	1742.80	35.428	X U 825 E O	1771.40	2546.40	2396.40	151.98	515.75	83.87	751.60	1794.80
Charles Halcher	J WD A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	52.500	2100.00	63.428	X U 825 E O	3171.40	4437.50	2887.50	182.44	648.79	101.07	932.30	3505.20
Timothy Houlihan	X J LBS A : H	1510 VXL VDS	RT OT ST O	8.00		8.00	3.00	8.00	8.50	27.00	36.650	989.55	26.530	X U 472 E O	1047.95	2153.20	1676.75	144.16	565.72	779.56	1469.44	663.76
Arnold Grant Jones	X J CPJ A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	1.00	40.00	44.540	1781.60	25.677	X U 254 E O	1052.75	1848.41	1848.41	114.60	292.81	184.84	592.25	1256.16

**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 #: 33
 Week Ending Date: 2015-10-24
 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							
				18	19	20	21	22	23	24													

Carlos A. Lamego	X A : H	J LBJ 1710 SLA PWG	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	36.250	1450.00	26.530	X U 472	1366.3 1	2075.33	2075.33	138.25	553.67	82.78	774.90	1300.43
Kevin Lamego	X A : H	J LBJ 1510 XFM ZMY	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	36.250	1450.00	26.530	X U 472	1127.5 4	1585.94	1585.94	106.24	436.68	65.15	607.98	977.96
Angel Laureano	X A : H	J LBJ	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	36.250	1450.00	26.530	X U 472	1379.5 6	2102.52	2102.52	140.03	601.59	83.76	825.38	1277.14
David Marconi	X A : H	J OEC	RT OT ST O	8.00	6.00		8.00	8.00		8.00	30.00	43.570	1307.11	32.735	X U 825	1260.2 8	2428.09	1862.67	154.06	547.04	85.02	786.12	1642.97
John F McGuire	X A : H	J OEB	RT OT ST O	8.00	8.00	8.00	8.00	8.00		8.00	40.00	45.480	1819.20	32.309	X U 825	1589.3 0	2467.29	2467.29	156.33	538.59	86.36	781.28	1666.01

**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 #: 33
 Week Ending Date: 2015-10-24
 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	18	19	20	21	22	23				24									

Nick Pietrolacovo	X A : H	J LBJ	RT OT ST O	5.00	8.00	8.00	8.00	8.00		40.00	36.390	1455.60	26.530	X	U 472	1339.78	2027.61	2027.61	135.11	447.51	80.99	663.61	1364.00
Edward Rizzo	X A : H	J OEA	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	47.070	1882.80	32.772	X	U 825	1687.74	2694.82	2694.82	170.63	613.62	94.31	878.56	1816.26
Michael Scatley	X A : H	J OEA	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	47.070	1882.81	32.309	X	U 825	1599.30	2553.61	2553.61	161.68	505.01	89.38	756.07	1797.54
Patrick A. Shreeves	A : H	J WDH	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	43.670	1742.80	35.428	X	U 825	1771.40	2546.40	2396.40	151.99	534.51	83.87	770.37	1776.03
Matthew Voorhees	X A : H	J OEA	RT OT ST O	8.00	8.00	2.00	8.00	8.00		34.00	47.070	1600.38	31.691	X	U 825	1267.54	2024.04	2024.04	128.16	472.55	70.84	671.55	1352.49

**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 #: 33
Week Ending Date: 2015-10-24
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 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							
				18	19	20	21	22	23	24													

Bryan Wayne	J WD A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	52.500	2100.00	63.428	X U 825 E O	3171.4 0	4437.50	2887.50	182.43	859.40	101.07	1142.90	3294.60
Robert White	X J LBJ A : H	1810 PIP GAF	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	36.250	1450.00	26.530	X U 472 E O	1366.3 1	2075.32	2075.32	138.25	382.41	82.78	603.44	1471.88

**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 # 33			Week Ending Date 2015-10-24		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 Unlon Is checked)								Total Paid
				18	19	20	21	22	23				24										

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
28th of October, 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

Elizabeth Russo 10/28 20 15
 Signature of Notary Public DATE

Elizabeth Russo
 Notary Public of New Jersey
 ID# 2362950
 My Commission Expires 3/6/2017

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Manager (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>

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Manager (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Cash 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 Cash 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 #: **34** Week Ending Date: **2015-10-31** 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							
				25	26	27	28	29	30	31													
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	8.00 8.00	40.00 18.00	43.570 65.360	1742.80 1176.48	36.641	X U 825 E O	2125.16 0.00 102.18	3069.28	2919.28	185.15	690.59	102.18	977.92	2091.36
Adelino M. DeMatos	X J LBJ A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00	1.00	40.00 1.00	36.250 54.380	1450.00 54.38	26.530	X U 472 E O	1087.73 0.00 62.21	1504.38	1504.38	100.89	267.93	62.21	431.03	1073.35
Junior Elie	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 18.00	43.570 65.360	1742.80 1176.48	36.641	X U 825 E O	2125.16 0.00 102.18	3069.28	2919.28	185.15	679.01	102.18	957.34	2111.94	
Joseph Erbe III	J F3 A : H		RT OT ST O		8.00 1.50	8.00 .50	8.00 .50	8.00 1.50	8.00 .50	40.00 4.50	38.500 57.756	1540.00 259.90	26.530	X U 472 E O	1180.60 0.00 71.70	1799.90	1799.90	119.87	470.02	71.70	661.59	1138.31	
Gilberto Geada	X J OEA A : H	M15 TPT UPH	RT OT ST O		8.00	8.00 1.00	8.00	8.00	8.00	40.00 1.00	47.070 70.610	1882.80 70.61	29.840	X U 825 E O	1223.44 0.00 93.13	2660.64	1953.41	168.49	622.62	93.13	884.44	1776.20	

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 #: 34
 Week Ending Date: 2015-10-31
 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							
				25	26	27	28	29	30	31													

Carlos A. Lamego	X J LBJ A : H	1710 SLA PING	RT OT ST O	8.00 1.50	8.00	8.00	8.00	8.00	8.00	40.00 1.50	36.250 54.373	1450.00 81.56 0.00 63.19	26.530	X U 472 E O	1101.2 1	1531.56	1531.56	102.67	355.66	63.19	521.52	1010.04
Kevin Lamego	X J LBJ A : H	1510 XFH ZMY	RT OT ST O	8.00 .50	8.00	8.00	8.00	8.00	8.00	40.00 .50	36.250 54.380	1450.00 27.19 0.00 61.23	26.530	X U 472 E O	1074.4 8	1477.19	1477.19	99.11	398.20	61.23	558.54	918.65
Angel Laureano	X J LBJ A : H		RT OT ST O	8.00 2.00	8.00	8.00	8.00	8.00	8.00	40.00 10.00	36.250 54.376	1450.00 543.76 0.00 79.84	26.530	X U 472 E O	1326.5 8	1993.76	1993.76	132.91	591.16	79.84	803.91	1189.85
David Marconi	X J DEC A : H		RT OT ST O	8.00 4.00	8.00	2.50	6.00	6.00	2.00	24.50 6.00	43.571 65.360	1067.49 392.16 0.00 74.73	32.378	X U 825 E O	987.52	2125.00	1459.65	135.41	449.12	74.73	659.26	1475.74
John F McGuire	X J OEA A : H		RT OT ST O	8.00 1.00	8.00	8.00	8.00	8.00	8.00	40.00 1.00	46.732 70.610	1870.09 70.61 0.00 67.92	29.840	X U 825 E O	1223.4 4	1940.70	1940.70	122.90	363.02	67.92	553.84	1386.86

**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 # 34
Week Ending Date 2015-10-31
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							
				25	26	27	28	29	30	31													

Nick Petroiacovo	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	36.250	1450.00	26.530	X U 472	1087.73	1504.38	1504.38	100.89	287.94	62.21	431.04	1073.34
Edward Riho	X J DEA A : H	1710 USV FCN	RT OT ST O	8.00	1.50	8.00	8.00	8.00	1.50	5.00	47.070	1882.80	31.118	X U 825	1400.32	2235.86	2235.86	141.57	481.04	78.28	680.87	1554.99
Michael Scally	X J DEA A : H		RT OT ST O	8.00	1.00	8.00	8.00	8.00	1.00	3.00	47.070	1882.80	30.509	X U 825	1311.88	2094.63	2094.63	132.63	335.71	73.31	541.65	1552.98
Patrick A. Shreeves	J WDH A : H		RT OT ST O	8.00	2.00	8.00	8.00	8.00	2.00	10.00	43.570	1742.80	35.428	X U 825	1771.40	2546.40	2396.40	151.99	534.48	184.95	871.42	1674.98
Matthew Voorhees	X J DEA A : H		RT OT ST O	8.00	2.00	8.00	8.00	8.00	2.00	8.00	47.070	1882.80	34.054	X U 825	1975.16	3153.78	3153.78	199.69	892.19	110.38	1202.26	1851.52

**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 # 34	Week Ending Date 2015-10-31	Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ	PA Contract Number 69950373
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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									
				25	26	27	28	29	30	31															
Bryan Wayne	J WD A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	52.500	2100.00	63.428	X	U 825	3171.40	4437.50	2887.50	182.44	859.41	101.07	1142.92	3294.58		
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	36.250	1450.00	26.530	X	U 472	1101.01	1531.57	1531.57	102.67	221.40	63.19	387.26	1144.31		

**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 # 34			Week Ending Date 2015-10-31			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
				25	26	27	28	29	30				31										

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
4th of November, 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

Kristen Jimenez
 Signature of Notary Public

11/4 , 20 15
 DATE

KRISTEN L JIMENEZ
 NOTARY PUBLIC OF NEW JERSEY
 My Commission Expires June 9, 2018
 Commission I.D. No. 2301436

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Manager (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: **Contrl Enterprises, Inc.- EWR 154.183** Address: **2045 LINCOLN HIGHWAY** EIN #: _____

Payroll #: **35** Week Ending Date: **2015-11-07** 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) Lelpor	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								
				1	2	3	4	5	6	7														
Albert Patrick Andrews	J WDH A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	43.570	1742.80	36.641	X U 825 E O	2125.1 6	3069.28	2919.28	185.15	690.59	102.18	977.92	2091.36
Adelino H. DeMaio	X J LBJ A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	36.390	1455.60	26.530	X U 472 E O	1406.0 9	2185.13	2165.13	144.10	494.73	85.93	724.76	1440.37
Junior Ellis	J WDH A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	43.570	1742.80	36.769	X U 825 E O	2169.4 0	3134.64	2984.64	189.30	692.39	104.46	986.15	2148.49
Joseph Erife III	J F3 A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	38.500	1540.00	26.530	X U 472 E O	1406.0 9	2290.77	2290.77	151.88	636.93	89.07	897.68	1392.89
Gilberto Gaada	X J OEA A : H	1710 TPT UPH	RT OT ST O		8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	47.071	1892.82	33.500	X U 825 E O	1842.5 2	2941.98	2941.98	186.28	717.26	102.97	1006.51	1895.47

**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 #: **35** Week Ending Date: **2015-11-07** 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 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							
				1	2	3	4	5	6	7													

Klint Groves	X A : H	J CPF	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	51.810	2072.40	31.150	X U 254	1355.0 3	2344.41	2344.41	145.36	480.82	234.44	860.72	1483.69
Armando Gutierrez	A : H	J WDH	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	43.571	1742.82	36.641	X U 825	2125.1 5	3069.30	2919.30	185.15	690.60	102.18	977.83	2091.37
Charles Hatcher	A : H	J WD	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	52.500	2100.00	63.123	X U 825	3661.1 6	5203.50	3517.50	222.24	880.96	123.12	1206.32	3987.18
Timothy Houshan	X A : H	J LBS	RT OT ST O	8.00	8.00	4.00	8.00	8.00	8.00	36.00	36.651	1319.42	26.530	X U 472	1525.4 3	2675.48	2501.39	178.31	766.49	798.32	1743.12	932.36
Arnold Grant Jones	X A : H	J CPJ	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	45.050	1802.00	27.142	X U 254	1180.6 5	2038.52	2038.52	126.39	340.55	203.86	670.80	1367.72

**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 #: 35
Week Ending Date: 2015-11-07
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							
				1	2	3	4	5	6	7													

Carlos A. Lamego	X J LBJ A : H	1710 SLA PNG	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	36.391	1455.62	26.530	X U 472	1512.2 1	2386.31	2386.31	158.55	673.25	93.86	925.66	1460.65
Kevin Lamego	X J LBJ A : H	1510 XFM ZMY	RT OT ST O	8.00	8.00	8.00	8.00	8.00	1.00	6.00	40.00	36.390	1455.60	26.530	X U 472	1246.9 1	1836.24	1836.24	122.69	530.46	74.11	727.16	1109.08
Angel Laureano	X J LBJ A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00	8.00	32.00	36.251	1160.02	26.530	X U 472	1273.4 4	2030.04	2030.04	134.79	602.19	79.65	816.53	1213.51
David Marconi	X J OEA A : H		RT OT ST O	8.00	8.00		8.00	8.00		5.00	32.00	44.445	1422.24	32.279	X U 825	1275.0 2	2797.01	1925.57	177.34	669.24	97.90	944.48	1852.53
John F McGuire	X J OEA A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	1.00	1.50	40.00	45.798	1831.92	32.545	X U 825	1843.5 2	2548.23	2548.23	161.44	565.42	89.19	816.05	1732.18

**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 #
35

Week Ending Date
2015-11-07

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									
				1	2	3	4	5	6	7															

Bryan Wayne	J	WD	RT	8.00	8.00	8.00	8.00	8.00	8.00	40.00	52.500	2100.00	63.123	X	U	825	3661.18	5203.50	3517.50	222.24	1093.41	123.12	1438.77	3764.73	
	A	:		OT	2.00	2.00	2.00	2.00	2.00	8.00	18.00	78.750	1417.50			E									
	H	:		ST									0.00			O									
Robert White	X	J	LBJ	RT	8.00	8.00	8.00	8.00	8.00	40.00	35.390	1455.61	26.530	X	U	472	1339.78	2032.87	2032.67	135.43	367.61	81.12	584.16	1448.71	
	A	:	OT		1.00	2.50		1.00	6.00	10.50	54.977	577.28			E										
	H	:	ST									0.00				O									

1810
PIP
GAF

**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 # 35			Week Ending Date 2015-11-07			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							
				1	2	3	4	5	6	7													

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
11th of November, 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

[Signature]
 Signature of Notary Public

11/11, 2015
 DATE

JAIME B. STONER
NOTARY PUBLIC OF NEW JERSEY
ID # 50018312
My Commission Expires 6/24/2020

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Manager (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
E I N #:

Payroll #: 36
Week Ending Date: 2015-11-14
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	14													
Albert Patrick Andrews	J WDH A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	43.570	1742.80	36.841	X U 825 E O	2125.15	3068.28	2919.28	185.15	690.59	102.18	977.92	2091.36
Adelino H. DeMatos	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00			40.00	36.250	1450.00	26.530	X U 472 E O	1061.20	1450.00	1450.00	97.32	252.83	60.25	410.40	1038.60
Junior Elle	J WDH A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	43.570	1742.80	36.769	X U 825 E O	2169.40	3134.64	2984.54	189.29	692.38	104.46	986.13	2148.51
Joseph Erile III	J F3 A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00			40.00	38.500	1540.00	26.530	X U 472 E O	1140.79	1713.28	1713.28	114.23	438.53	68.63	621.39	1091.89
Gilberto Geada	X J DEA A : H	1715 TPT UPH	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	8.00	40.00	47.070	1882.81	31.937	X U 825 E O	1532.96	2447.70	2447.70	154.98	551.88	85.67	782.53	1655.17

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				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union Is checked)	Total Paid							
				8	9	10	11	12	13	14													

Klnt Groves	X J CPF A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	51.810	2072.41	30.144	X U 254 E O	1220.8 5	2111.27	2111.27	130.89	405.03	211.12	747.04	1364.23
Amardo Gutierrez	J WDH A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	43.570	1742.80	35.428	X U 825 E O	1771.4 0	2546.40	2396.40	151.99	515.74	83.87	751.60	1794.80
Charles Halcher	J WD A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	52.500	2100.00	63.123	X U 825 E O	3661.1 6	5203.50	3517.50	222.24	860.97	123.12	1206.33	3997.17
Timothy Houlihan	X J LBS A : H	1510 VXL VBS	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	36.650	1486.01	26.530	X U 472 E O	1512.2 1	2400.50	2400.50	160.33	660.61	788.45	1609.59	791.01
Arnold Grant Jones	X J CPJ A : H		RT OT ST O	8.00	8.00	8.00		8.00		32.00	45.050	1441.61	26.307	X U 254 E O	854.87	1475.40	1475.40	91.47	196.02	147.54	435.03	1040.37

THE PORT AUTHORITY OF NY & NJ

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 Address: 2045 LINCOLN HIGHWAY
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Payroll #: 36
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				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union Is checked)	Total Paid							
				U	9	10	11	12	13	14													

Carlos A. Lamego	X J LBJ A : H	1710 SLA PNG	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	36.250	1450.00	26.530	X	U 472	1235.6 8	1803.45	1803.45	120.47	451.62	72.99	645.08	1158.37
Kevin Lamego	X J LBJ A : H	1510 XFM ZMY	RT OT ST O		8.00	8.00	8.00	8.00		32.00	36.250	1160.00	26.530	X	U 472	1021.4 2	1513.45	1513.45	101.00	408.32	60.94	570.26	943.19
Angel Laureano	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	36.250	1450.00	26.530	X	U 472	1538.7 4	2428.78	2428.78	181.37	758.47	95.62	1015.36	1413.42
David Marconi	X J OEC A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	43.670	1742.81	30.509	X	U 825	1311.8 8	1938.89	1938.89	122.97	383.81	67.86	574.64	1384.25
John F McGuire	X J OEA A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	45.768	1831.93	29.662	X	U 825	1201.3 2	1657.24	1667.24	118.30	338.86	65.36	522.52	1344.72

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Address: 2045 LINCOLN HIGHWAY
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				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union Is checked)	Total Paid							
				8	9	10	11	12	13	14													

Nick Pietrolacovo	X A : H	J LBJ	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	36.250	1450.00	26.530	X U E O	472	1127.5 4	1585.85	1585.85	106.24	295.95	65.15	467.34	1118.81
Edward Riho	X A : H	J OEA	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	47.070	1882.80	31.541	X U E O	825	1468.6 4	2341.77	2341.77	148.28	498.25	81.96	726.49	1615.28
Michael Scalley	X A : H	J OEA	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	47.070	1882.81	29.662	X U E O	825	1201.3 2	1918.12	1918.12	121.45	276.96	67.13	485.54	1452.58
Patrick A. Shreeves	A : H	J WDH	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	43.570	1742.80	36.641	X U E O	825	2125.1 6	3069.28	2919.28	185.15	713.44	203.26	1101.85	1967.43
Matthew Voorhees	X A : H	J OEA	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	47.070	1882.80	33.785	X U E O	825	1808.8 4	3047.87	3047.87	192.98	852.76	106.68	1152.42	1895.45

**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 # 36			Week Ending Date 2015-11-14			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							
				8	9	10	11	12	13	14													

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
18th of November, 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

[Signature]
 Signature of Notary Public
JAIME B. STONER
 NOTARY PUBLIC OF NEW JERSEY
 ID # 50018312
 My Commission Expires 6/24/2020

11/18, 2015
 DATE

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Manager (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 #: 37
 Week Ending Date: 2015-11-21
 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							
				15	16	17	18	19	20	21													
Albert Patrick Andrews	J WDH A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	43.570	1742.60	36.641	X U 825 E O	2125.1 6	3069.28	2919.28	165.15	690.69	102.18	977.92	2091.36
Adelino H. DeMatos	X J LBJ A : H		RT OT ST O			8.00	8.00	8.00	8.00		32.00	36.250	1160.00 0.00 0.00 60.25	28.530	X U 472 E O	848.98	1450.00	1160.00	87.34	252.84	60.25	410.43	1039.57
Junior Elle	J WDH A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	43.570	1742.80	38.641	X U 825 E O	2125.1 6	3069.28	2919.28	185.15	670.01	102.18	857.34	2111.94
Joseph Erle III	J F3 A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	38.500	1540.00 144.40 0.00 87.81	28.530	X U 472 E O	1127.5 4	1684.40	1684.40	112.33	428.37	67.61	608.31	1076.09
Gizberto Gesda	X J OEA A : H	1715 TPT UPH	RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	47.070	1882.80 70.61 0.00 88.37	29.840	X U 825 E O	1223.4 4	1953.41	1853.41	123.68	387.56	68.37	579.61	1373.80

**THE PORT AUTHORITY
OF NY & NJ**

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Payroll #: 37
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				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union Is checked)	Total Paid							
				15	16	17	18	19	20	21													

Klint Groves	X A: H	J CPF	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	51.611	2072.42	28.962	X U 254	1189.48	2072.42	2072.42	128.50	392.39	207.24	726.13	1344.29
Armando Gutierrez	A: H	J WDH	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	43.570	1742.80	36.641	X U 825	2125.16	3069.28	2919.28	185.15	690.59	102.18	977.92	2091.36
Charles Hatcher	A: H	J WD	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	52.500	2100.00	63.428	X U 825	3171.40	4437.50	2887.50	182.44	648.80	101.07	932.31	3505.19
Timothy Houlihan	X A: H	J LBS	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	36.650	1466.00	26.530	X U 472	1114.26	1575.96	1575.96	106.42	355.27	758.83	1220.52	355.44
Arnold Grant Jones	X A: H	J CPJ	RT OT ST O	8.00	8.00	8.00	2.00	8.00		34.00	45.051	1531.72	26.109	X U 254	867.69	1531.72	1531.72	94.97	207.48	153.18	455.63	1076.09

**THE PORT AUTHORITY
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Address: 2045 LINCOLN HIGHWAY
EIN #

Payroll # 37
Week Ending Date 2015-11-21
Project Name & Location EWR154.183 Aviation Fuel Sys, Newark NJ
PA Contract number 69950373

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				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # if Union Is checked)	Total Paid							
				15	16	17	18	19	20	21													

Carlos A. Lamego	X J LBJ A : H	1710 SLA WPG	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	36.250	1450.00	26.530	X	U 472	1087.7 3	1504.38	1504.38	100.90	346.07	62.21	509.18	995.20
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	36.390	1455.61	26.530	X	U 472	1061.2 0	1455.61	1455.61	97.69	390.49	60.39	548.57	907.04
Angel Laureano	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	6.00	40.00	38.250	1450.00	26.630	X	U 472	1533.7 4	2428.79	2428.79	161.38	758.47	95.52	1015.37	1413.42
David Marconi	X J DEC A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	43.570	1742.81	32.428	X	U 825	1621.4 0	2396.41	2396.41	151.88	536.15	83.87	772.00	1624.41
John F McGuire	X J DEC A : H		RT OT ST O	8.00		8.00	8.00	8.00		32.00	45.480	1455.36	29.480	X	U 826	943.36	1455.36	1455.36	62.22	223.04	50.94	368.20	1089.16

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				15	16	17	18	19	20	21													

Nick Patrosicovo	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	36.720	1468.80	26.530	X U 472	1087.7 3	1524.60	1524.60	102.15	274.62	62.72	498.39	1085.21
Edward Rho	X J OEA A : H	1710 USV FCN	RT OT ST O	8.00	8.00	8.00	8.00			32.00	47.070	1506.24	28.480	X U 825	943.36	2061.09	1506.24	130.50	402.95	72.14	605.59	1455.50
Michael Scalfey	X J OEA A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	47.070	1882.80	30.182	X U 825	1267.6 4	2024.03	2024.03	128.15	309.02	70.84	608.01	1516.02
Patrick A Shreeves	J WDH A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	43.670	1742.80	36.641	X U 825	2125.1 5	3069.28	2819.28	185.15	713.44	203.26	1101.85	1967.43
Matthew Voorhees	X J OEA A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	47.070	1882.80	34.054	X U 825	1975.1 5	3163.76	3153.76	199.69	892.18	110.38	1202.25	1951.53

**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 # 37			Week Ending Date 2015-11-21			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 Oeductions	Not
				S	MO	TU	WE	TH	FR	SA				Hourly Rate	Paid To (Local # If Union Is checked)	Total Paid							
				15	16	17	18	19	20	21													

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
24th of November 20 15

FALSIFICATION OF THIS STATEMENT IS A PUNISHABLE OFFENSE

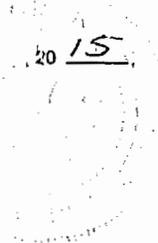
Brenda Davis certify that the information on both sides of this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for construction work on the above project during the period indicated above, and that all information provided on this Certification of 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

[Signature]
 Signature of Notary Public

11/24 DATE
 NOTARY PUBLIC OF NEW JERSEY
 ID # 50018312
 My Commission Expires 6/24/2020



Statement of Compliance

I do hereby state:

1. That I, Brandi Davis (Name of Signatory), Payroll Manager (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 #: 38
Week Ending Date: 2015-11-28
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 Eamad	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							
				22	23	24	25	26	27	28													
Albert Patrick Andrews	J WDH A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	43.570	1742.81	34.229	X U 825 E O	1506.0 8	2154.25	2004.25	127.11	385.18	70.15	582.44	1571.81	
Adelino H. DeMaio	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	36.250	1450.00	26.530	X U 472 E O	1061.2 0	1450.00	1450.00	97.34	252.83	60.25	410.42	1039.58	
Junior Elle	J WDH A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	43.570	1742.81	34.229	X U 825 E O	1506.0 8	2154.25	2004.25	127.12	364.78	70.15	582.05	1592.20	
Joseph Erie III	J F3 A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	38.500	1540.00	26.530	X U 472 E O	1074.4 8	1568.88	1568.88	104.81	397.72	63.52	556.05	1012.83	
Gilberto Gueda	X J OEA A : H	1710 TPT UPH	RT OT ST O	8.00	8.00	2.00	8.00	8.00		34.00	47.070	1600.38	29.902	X U 825 E O	1046.5 8	1953.41	1670.99	123.69	387.57	68.37	579.63	1373.78	

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 #
38

Week Ending Date
2015-11-28

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									
				22	23	24	25	26	27	28															

Klint Groves	X A : H	J CPF	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	51.810	2072.40	29.962	X E O	U 254	1198.4 8	2072.40	2072.40	128.48	392.38	207.24	728.10	1344.30
Armando Gutierrez	A : H	J WDH	RT OT ST O	8.00 2.00	8.00 2.00	8.00	8.00	8.00		40.00 4.00	43.571 65.360	1742.82 281.44	34.229	X E O	U 825	1506.0 8	2154.26	2004.26	127.12	385.18	70.15	582.45	1571.81
Charles Hatcher	A : H	J WD	RT OT ST O	8.00 2.00	8.00 2.00		8.00	8.00		32.00 4.00	52.500 78.750	1680.00 315.00	67.562	X E O	U 825	2432.2 4	3307.00	1995.00	126.04	359.74	69.83	555.61	2751.39
Timothy Houlihan	X A : H	J LBS	RT OT ST O	8.00	8.00		8.00	8.00		32.00	35.650	1172.80 0.00 742.75	26.530	X E O	U 472	848.85	1172.80	1172.80	79.56	212.50	742.75	1034.81	137.99
Arnold Grant Jones	X A : H	J CPJ	RT OT ST O	8.00	8.00	8.00		8.00		32.00	45.050	1441.60 0.00 144.16	26.108	X E O	U 254	835.46	1441.60	1441.60	89.38	189.14	144.16	422.68	1018.92

**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 #: 38
Week Ending Date: 2015-11-28
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	23	24	25	26	27	28													

Carlos A. Lamego	X A : H	J LBJ 1710 SLA PNG	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	36.250	1450.00	26.530	X U 472 E O	1061.2 0	1450.00	1450.00	97.34	326.87	60.25	484.46	965.54
Kevin Lamego	X A : H	J LBJ 1510 XFM ZMY	RT OT ST O	8.00		8.00	8.00	8.00	4.00	32.00	36.250	1160.00	26.530	X U 472 E O	955.08	1377.50	1377.50	92.10	360.34	56.04	508.48	869.02
Angel Laureano	X A : H	J LBJ	RT OT ST O	8.00	2.00	8.00	8.00	8.00		40.00	36.251	1450.02	26.530	X U 472 E O	1167.3 2	1667.53	1667.53	111.57	465.68	68.09	645.34	1022.19
David Marconi	X A : H	J DEC	RT OT ST O	8.00	.50	8.00	8.00	8.00		40.00	43.570	1742.80	29.662	X U 825 E O	1201.3 2	1775.48	1775.48	112.61	329.41	62.14	504.16	1271.32
John F McGuire	X A : H	J OEB	RT OT ST O	8.00		8.00	8.00	8.00		40.00	45.480	1819.20	29.480	X U 825 E O	1179.2 0	1819.20	1819.20	115.27	322.88	63.68	501.93	1317.27

**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 #: 38
Week Ending Date: 2015-11-28
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							
				22	23	24	25	26	27	28													

Joao S. Neno	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00	8.00			32.00	36.250	1160.01 0.00 60.25	26.531	X U E O	472	848.99	1450.01	1160.01	97.34	262.83	60.25	420.42	1029.59
Ero Noonan	X J OEA A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	47.070	1882.80 0.00 65.89	29.480	X U E O	825	1179.20	1882.80	1882.80	119.21	418.44	65.89	603.54	1279.26
Nick Pietrolacovo	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	36.250	1450.01 0.00 60.25	26.530	X U E O	472	1081.20	1450.01	1450.01	97.34	252.84	60.25	410.43	1039.58
Edward Riho	X J OEA A : H	1710 USV FCN	RT OT ST O	8.00	8.00	8.00	8.00	8.00	4.00	40.00	47.070	1882.81 292.44 75.79	30.820	X U E O	825	1356.08	2165.25	2165.25	137.10	437.59	75.79	650.48	1514.77
Michael Scalley	X J OEA A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	47.070	1882.80 0.00 65.89	29.480	X U E O	825	1179.20	1882.80	1882.80	119.22	268.63	65.89	453.94	1428.86

**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 # 38				Week Ending Date 2015-11-28				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
				22	23	24	25	26	27	28													

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
2nd of December, 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

[Signature] 12/2, 2015
 Signature of Notary Public DATE

JAIME B. STONER
 NOTARY PUBLIC OF NEW JERSEY
 ID # 50018312
 My Commission Expires 6/24/2020

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Manager (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 #
39

Week Ending Date
2015-12-05

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							
				29	30	1	2	3	4	5													
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	8.00 8.00	40.00 18.00	43.570 65.360	1742.80 1176.48	36.641	X U 825 E O	2125.1 6	3069.28	2919.28	185.15	690.59	102.18	977.92	2091.36
Adelino H. DeMalos	X J LBJ A : H		RT OT ST O		8.00	2.00		8.00	2.50	8.00	26.00 2.50	38.250 54.376	942.50 135.04	26.531	X U 472 E O	756.12	1368.44	1076.44	91.64	233.40	56.11	381.15	987.29
Junior Elle	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	8.00 8.00	40.00 18.00	43.570 65.360	1742.80 1176.48	36.641	X U 825 E O	2125.1 6	3069.28	2919.28	185.15	670.01	102.18	957.34	2111.94
Joseph Erie III	J F3 A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00	1.00	40.00 1.00	38.500 57.750	1540.00 57.75	26.530	X U 472 E O	1067.7 3	1597.75	1597.75	106.88	397.87	64.54	569.09	1028.66
Gilberto Gada	X J DEA A : H	1715 TPT UPH	RT OT ST O		8.00	8.00	8.00	8.00	8.00	2.50	40.00 2.50	47.070 70.612	1882.81 176.53	30.347	X U 825 E O	1269.7 6	2059.34	2059.34	130.39	422.77	72.08	825.24	1434.10

As submitted
W/APP # 12

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 #: 39
 Week Ending Date: 2015-12-05
 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							
				29	30	1	2	3	4	5													

Kint Groves	X J CPF A : H		RT OT ST O			8.00	8.00	8.00	8.00		32.00	61.810	1657.92	33.739	X	U 254	1450.79	2512.80	2512.80	155.00	535.73	251.28	942.81	1589.99
William T Groves	X J CPA1 A : H		RT OT ST O			8.00	8.00	8.00	8.00		24.00	18.020	432.48	12.212	X	U 254	415.21	702.78	702.78	43.57	81.85	70.28	195.70	507.08
Amando Gutierrez	J WDH A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00			40.00	43.570	1742.80	35.428	X	U 825	1771.40	2548.40	2395.40	151.98	515.75	83.87	751.60	1794.80
Charles Hatcher	J WD A : H		RT OT ST O			8.00	8.00	8.00	8.00		32.00	52.500	1680.00	65.977	X	U 825	3165.88	4455.00	2940.00	185.75	665.70	102.90	954.35	3501.65
Timothy Houlihan	X J LBS A : H	1510 VXL VDS	RT OT ST O	8.00	8.00	8.00	8.00	8.00			40.00	36.650	1466.00	26.530	X	U 472	1339.78	2043.24	2043.24	136.97	523.45	775.61	1436.03	607.21

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 #: 39
 Week Ending Date: 2015-12-05
 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							
				29	30	1	2	3	4	5													

Arnold Grant Jones	X J CPJ A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	45.050	1802.00	28.878	X U 254	1472.78	2545.34	2545.34	157.81	505.52	254.53	917.86	1827.48
Carlos A. Lamego	X J LBJ A : H	1710 SLA PWG	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	36.250	1450.00	26.530	X U 472	1366.31	2075.32	2075.32	138.24	553.86	62.78	774.88	1300.44
Kevin Lamego	X J LBJ A : H	1510 XFM ZMY	RT OT ST O	8.00	2.00		8.00	8.00		26.00	36.250	942.50	26.530	X U 472	688.78	1232.50	942.50	82.74	310.80	51.21	444.75	787.75
Angel Laureano	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	36.250	1450.00	26.530	X U 472	1229.97	1938.40	1938.40	129.36	570.25	77.89	777.50	1161.90
David Marconi	X J DEC A : H		RT OT ST O	8.00	1.00	4.00				13.00	43.570	566.41	29.480	X U 825	385.24	2265.68	568.41	143.70	492.62	79.30	715.62	1550.06

**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 #: 39
Week Ending Date: 2015-12-05
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							
				29	30	1	2	3	4	5													

John F McGuire	X A : H	J OEA	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	45.796	1831.92	29.840	X E O	U 825 1223.4 4	1902.54	1902.54	120.53	350.60	66.59	537.72	1364.82
Jose S. Neno	X A : H	J LBJ	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	36.250	1450.00	26.530	X E O	U 472 1353.0 3	2048.14	2048.14	136.47	464.70	81.80	682.97	1365.17
Eric Noonan	X A : H	J OEA	RT OT ST O		8.00		8.00	8.00	8.00	24.00	47.070	1129.68	33.815	X E O	U 825 1149.7 2	1835.78	1835.78	116.24	402.00	64.25	582.49	1253.29
Nick Pietrolacovo	X A : H	J LBJ	RT OT ST O	8.00	8.00					16.00	36.250	580.00	26.530	X E O	U 472 424.48	1450.00	580.00	97.34	252.83	60.25	410.42	1039.58
Edward Riho	X A : H	J OEA	RT OT ST O	8.00	8.00		8.00	8.00		32.00	47.070	1506.24	30.744	X E O	U 825 1076.0 4	2094.53	1718.07	132.62	414.10	73.31	620.03	1474.60

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**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 # 39			Week Ending Date 2015-12-05			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									
				29	30	1	2	3	4	5															

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
9th of December 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

[Signature]
 Signature of Notary Public

12/9, 20 15
 DATE

JAIME B. STONER
 NOTARY PUBLIC OF NEW JERSEY
 ID # 50018312
 My Commission Expires 6/24/2020

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Manager (Title or Position), during the payroll period indicated on the reverse side, supervise the payment of the persons employed by Corti 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 Corti 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: Confi Enterprises, Inc.- EWR 154.183
Address: 2045 LINCOLN HIGHWAY
EIN #

Payroll # 40
Week Ending Date 2015-12-12
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							
				6	7	8	9	10	11	12													

Klint Groves	X J CPF A : H		RT OT ST O	8.00 1.50	8.00 1.50	8.00	8.00	8.00	8.00	40.00 4.00	51.810 77.715	2072.40 310.86 0.00 238.32	31.304	X U 254 E O	1377.3 9	2383.26	2383.26	147.76	493.57	238.32	579.65	1503.61
William T Groves	X J CPA1 A : H		RT OT ST O	8.00 1.00	8.00 1.00	8.00	7.00	8.00		39.00 2.00	18.020 27.030	702.78 54.06 0.00 75.68	10.952	X U 254 E O	448.04	756.84	756.84	46.83	82.72	75.68	215.33	541.51
Armando Gutierrez	J WDH A : H		RT OT ST O	8.00 2.00	8.00 2.00	8.00	8.00	8.00	8.00	40.00 26.00	43.570 65.356	1742.80 1699.32 0.00 120.48	37.559	X U 825 E O	2478.9 2	3592.12	3442.12	218.31	735.98	120.48	1074.77	2517.35
Charles Hatcher	J WD A : H		RT OT ST O	8.00 2.00	8.00 2.00	8.00	8.00	8.00		40.00 10.00	52.500 78.750	2100.00 787.50 0.00 101.07	63.428	X U 825 E O	3171.4 0	4437.50	2887.50	182.44	648.79	101.07	932.30	3505.20
Arnold Grant Jones	X J CPJ A : H		RT OT ST O	8.00 1.00	8.00 1.00	8.00	8.00	8.00		40.00 3.00	45.050 67.580	1802.00 202.74 0.00 200.48	27.004	X U 254 E O	1151.1 8	2004.74	2004.74	124.29	329.56	200.48	654.33	1350.41

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 # 40
 Week Ending Date 2015-12-12
 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 DDL 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	7	8	9	10	11	12													

Carlos A. Lamego	X J LBJ A : H	1710 SLA WPG	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	36.250	1450.00	26.530	X U 472	1061.2 0	1895.00	1450.00	125.80	480.67	75.93	682.40	1202.60
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	36.250	1450.00	26.530	X U 472	1087.7 3	1504.38	1504.38	100.89	407.79	62.21	570.89	933.49
Angel Laurano	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	36.250	1450.00	26.530	X U 472	1538.7 4	2428.79	2428.79	161.37	758.47	95.52	1015.36	1413.43
David Marconi	X J OEC A : H		RT OT ST O	8.00	2.00	3.00	8.00	8.00		29.00	43.570	1263.53	31.088	X U 825	1009.7 0	2036.92	1492.29	128.18	416.46	71.29	616.93	1419.99
John F McGuire	X J OEB A : H		RT OT ST O	8.00	8.00	8.00				24.00	45.480	1091.52	28.480	X U 825	707.52	2409.52	1091.52	152.61	519.04	84.34	755.89	1653.53

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 #: 40
 Week Ending Date: 2015-12-12
 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							
				6	7	8	9	10	11	12													

Jose S. Neno	X A : H	J LBJ	RT OT ST O	8.00 1.00	8.00 1.00	8.00	8.00	8.00	8.00	40.00 3.00	36.250 54.380	1450.00 163.14 0.00 81.80	26.530	X E O	U 472	1140.7 9	2048.14	1613.14	136.47	464.69	81.80	682.96	1365.16
Eric Noonan	X A : H	J OEA	RT OT ST O	8.00 1.00	8.00 1.00	8.00	8.00	7.50	7.50	47.00 3.00	47.070 70.610	2212.30 211.83 0.00 84.85	30.385	X E O	U 825	1510.2 4	2424.13	2424.13	153.49	469.65	84.85	707.99	1716.14
Edward Riho	X A : H	J OEA	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	47.070	1882.80 0.00 0.00 85.89	29.480	X E O	U 825	1173.2 0	1882.80	1882.80	119.22	343.68	65.89	528.79	1354.01
Patrick A. Shreeves	A : H	J WDH	RT OT ST O	8.00 2.00	8.00 2.00	8.00	8.00	8.00	8.00	40.00 18.00	43.570 65.360	1742.80 1176.45 0.00 203.26	36.841	X E O	U 825	2125.1 6	3069.28	2919.28	185.15	713.43	203.26	1101.84	1967.44
Matthew Voorhees	X A : H	J OEA	RT OT ST O	8.00 2.00	8.00 2.00	8.00	8.00	8.00	5.00	40.00 13.00	47.070 70.610	1882.80 917.93 0.00 98.02	33.096	X E O	U 825	1754.0 8	2600.73	2800.73	177.34	760.78	98.02	1036.14	1764.59

**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 # 40
 Week Ending Date 2015-12-12
 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	7	8	9	10	11	12													

Bryan Wayne	J WD A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	52.500	2100.00	63.428	X	U 625	3171.40	4437.50	2887.50	182.43	859.41	101.07	1142.91	3294.59
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	36.250	1450.00	25.530	X	U 472	1061.20	1450.00	1450.00	97.34	202.99	60.26	360.58	1089.42

**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 # 40		Week Ending Date 2015-12-12		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
				6	7	8	9	10	11				12										

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
16th of December, 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

[Signature]
 Signature of Notary Public

12/16, 20 15
 DATE

JAIME B. STONER
 NOTARY PUBLIC OF NEW JERSEY
 ID # 50018312
 My Commission Expires 6/24/2020

Statement of Compliance

I do hereby state:

1. That I, Brenda Davis (Name of Signatory), Payroll Manager (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 # **41** Week Ending Date **2015-12-19** 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	13	14	15	16	17	18													

Klint Groves	X	J CPF	RT	8.00	8.00	8.00	8.00	8.00		40.00	51.810	2072.40	30.831	X	U 254	1310.30	2266.69	2266.69	140.53	455.62	226.67	822.82	1443.87
		A :	OT	1.50	1.00					2.50	77.716	194.29			E								
		H	ST									0.00			O								
William T Groves	X	J CPA1	RT	8.00	8.00	8.00	8.00	8.00		40.00	18.020	720.80	10.946	X	U 254	459.73	774.86	774.86	48.04	96.55	77.48	222.07	552.79
		A :	OT	1.00	1.00					2.00	27.030	54.06			E								
		H	ST									0.00			O								
Amando Gutierrez		J WDH	RT	8.00	8.00	8.00	8.00	8.00		40.00	43.570	1742.80	36.641	X	U 825	2125.16	3069.28	2919.28	185.15	660.60	102.18	977.93	2091.35
		A :	OT	2.00	2.00	2.00	2.00	2.00	8.00	18.00	65.360	1176.48			E								
		H	ST									0.00			O								
Charles Hatcher		J WD	RT	8.00	8.00	8.00	8.00	8.00		40.00	62.500	2100.00	63.428	X	U 825	3171.40	4437.50	2867.50	182.43	648.60	101.07	932.30	3505.20
		A :	OT	2.00	2.00	2.00	2.00	2.00		10.00	78.750	787.50			E								
		H	ST									0.00			O								
Timothy Houlihan	X	J LBS	RT	1.00				8.00		9.00	36.650	329.85	26.534	X	U 472	278.61	2430.82	412.31	161.83	669.66	788.00	1619.49	811.33
		A :	OT					1.50		1.50	64.973	82.46			E								
		H	ST									0.00			O								

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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 #: 41
 Week Ending Date: 2015-12-19
 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	13	14	15	16	17	18													

Arnold Grant Jones	X A : H	J CPJ	RT OT ST O	8.00	8.00	8.00	5.00	8.00		37.00	45.050	1666.85	26.767	X U 254	1043.9 1	1802.01	1802.01	111.73	267.02	180.20	558.95	1243.06
John J Kwilecz	X A : H	J OEA	RT OT ST O					8.00		8.00	47.070	376.56 0.00	29.470	X U 825	235.76	1710.54	376.56	108.27	320.00	59.87	488.14	1222.40
Carlos A. Lamago	X A : H	J LBJ	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	36.250	1450.01	26.530	X U 472	1114.2 6	1658.76	1558.76	104.46	365.26	64.17	533.89	1024.87
Kevin Lamago	X A : H	J LBJ	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	36.250	1450.00	26.530	X U 472	1051.2 0	1450.00	1450.00	97.34	388.60	60.25	546.19	903.81
Angel Laureano	X A : H	J LBJ	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	36.250	1450.00	26.530	X U 472	1485.6 8	2320.03	2320.03	154.28	716.64	91.60	962.50	1357.53

**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 #: **41** Week Ending Date: **2015-12-19** 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	13	14	15	16	17	18													

David Marconi	X J OEC A : H		RT OT ST O		5.00	8.00 3.00	.50 1.00			6.00	13.50 10.00	43.570 65.360	588.20 653.60	35.751	X U E O	825 840.16	3050.01	1241.80	193.44	757.32	106.76	1057.51	1892.50
John F McGuire	X J OEA A : H		RT OT ST O					8.00		8.00	8.00 47.070	376.56 0.00	29.480	X U E O	825 235.84	2518.30	376.56	159.45	554.83	88.14	802.62	1715.78	
Joao S. Neno	X J LBJ A : H		RT OT ST O		8.00 1.00	8.00 1.00	8.00				24.00 2.00	36.260 64.380	670.00 108.76	26.530	X U E O	472 698.78	1885.01	978.76	125.80	408.67	75.93	610.40	1274.81
Eric Noonan	X J OEA A : H		RT OT ST O		8.00 1.00	8.00 1.00	8.00	8.00	8.00		40.00 2.00	47.070 70.610	1882.80 141.22	30.182	X U E O	825 1267.6 4	2024.02	2024.02	128.15	467.79	70.84	666.78	1357.24
Nick Pietrosicovo	X J LBJ A : H		RT OT ST O			8.00 .50	8.00	8.00			24.00 .50	36.260 64.380	670.01 27.19	26.531	X U E O	472 650.00	1504.40	897.20	100.80	267.94	62.21	431.05	1073.35

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 #: 41
 Week Ending Date: 2015-12-19
 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	14	16	16	17	18	19													

Edward Riho	X J OEA A : H	1710 USV FCN	RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	47.070	1882.81	30.182	X	U 825	1267.66	3307.28	2024.04	209.49	828.84	115.76	1154.09	2153.19
Patick A. Shreeves	J WDH A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	43.570	1742.80	36.641	X	U 825	2125.16	3066.28	2919.28	185.15	702.76	203.26	1091.17	1978.11
Burak Turan	X J OED A : H		RT OT ST O					8.00	8.00	8.00	41.940	335.52	30.348	X	U 825	257.98	368.98	366.98	23.30	19.04	12.84	55.18	311.80
Matthew Voorhees	X J OEA A : H		RT OT ST O	8.00		8.00	8.00	8.00	8.00	32.00	47.070	1506.24	33.866	X	U 825	1562.44	2494.78	2494.78	157.96	646.87	87.31	892.14	1602.64
Bryan Wayne	J WD A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	8.00	40.00	52.500	2100.00	63.428	X	U 825	3171.40	4437.50	2887.50	182.44	859.40	101.07	1142.91	3294.59

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 # 41			Week Ending Date 2015-12-19			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	M	T	W	T	F	S				Hourly Rate	Paid To (Local # If Union Is checked)	Total Paid							
				U	O	U	E	H	R	A				13	14	15							

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
22nd of December, 20 15

FALSIFICATION OF THIS STATEMENT IS A PUNISHABLE OFFENSE

I, Brenda Daws 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 Daws
 Print Name Officer/Designee

Brenda Daws
 Signature

Gina M Setzer
 Signature of Notary Public

12/22, 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 Manager (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
CIN#

Payroll # 42
Week Ending Date 2015-12-26
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								
				20	21	22	23	24	25	26														
Albert Patrick Andrews	J WDH A : H		RT OT ST O		8.00 2.00	8.00			8.00		24.00 2.00	43.570 65.360	1045.69 130.72	36.383	X U E O	825	945.96	1326.41	1176.41	74.61	167.18	41.17	282.96	1043.45
Adelino H. DeMatos	X J LBJ A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00 1.00	38.250 54.380	1450.00 54.38	28.530	X U E O	472	1087.7 3	1504.38	1504.38	100.90	267.93	62.21	431.04	1073.34
Junior Elle	J WDH A : H		RT OT ST O		8.00 2.00	8.00			8.00		24.00 2.00	43.570 65.360	1045.69 130.72	36.383	X U E O	825	945.96	1326.41	1176.41	74.62	155.14	41.17	270.93	1055.48
Joseph Erlie III	J F3 A : H		RT OT ST O		8.00	8.00	8.00	8.00	8.00		40.00	38.500	1540.00	28.530	X U E O	472	1061.2 0	1540.00	1540.00	102.82	377.55	62.50	542.97	997.03
Gilberto Gorda	X J OEA A : H	1710 TPT UPH	RT OT ST O		8.00 .50	8.00	8.00	8.00	8.00		40.00 .50	47.070 70.620	1882.80 35.31	29.562	X U E O	825	1201.3 2	2615.23	1918.11	165.66	607.98	91.54	865.16	1750.07

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 #: 42
 Week Ending Date: 2015-12-26
 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													

Klint Groves	X A : H	J CPF	RT OT ST O	8.00 1.00	8.00 1.00	8.00 1.00	8.00	8.00		40.00 3.00	51.810 77.720	2072.40 233.16 0.00 230.56	30.992	X U 254 E O	1332.6 S	2305.56	2305.56	142.95	468.27	230.56	841.78	1463.78
William T Groves	X A : H	J CPA1	RT OT ST O	8.00 1.00	8.00 1.00	8.00 1.00	8.00			32.00 3.00	18.020 27.030	576.64 81.09 0.00 85.78	11.141	X U 254 E O	389.95	657.73	657.73	40.78	73.18	65.78	179.74	477.99
Armando Gutierrez	A : H	J WDH	RT OT ST O	8.00 2.00	8.00			8.00		24.00 2.00	43.570 65.360	1045.69 130.72 0.00 41.17	36.383	X U 825 E O	945.96	1326.41	1176.41	74.61	167.19	41.17	282.97	1043.44
Timothy Houlihan	X A : H	J LBS	RT OT ST O	8.00 2.00	8.00	8.00 1.00	8.00	8.00	4.00	40.00 7.00	36.650 54.876	1466.00 384.83 0.00 768.70	26.530	X U 472 E O	1246.9 1	1850.83	1850.83	124.39	452.22	768.70	1345.31	505.52
Arnold Grant Jones	X A : H	J CPJ	RT OT ST O	8.00 1.00	8.00 1.00	8.00 1.00	8.00			32.00 3.00	45.050 67.580	1441.60 202.74 0.00 164.43	27.209	X U 254 E O	952.33	1644.34	1644.34	101.95	231.46	164.43	497.84	1146.50

1510
VXL
VDS

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 #: 42
 Week Ending Date: 2015-12-26
 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							
				20	21	22	23	24	25	26													

Carlos A. Lamego	X J LBJ A : H	1710 SLA PWG	RT OT ST O	8.00	8.00	8.00	8.00	8.00		40.00	36.250	1450.00	26.530	X	U 472	1114.26	1558.75	1558.75	104.45	365.26	64.17	533.88	1024.87
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	36.250	1450.00	26.530	X	U 472	1114.26	1558.76	1558.76	104.46	426.99	64.17	595.62	963.14
Angel Laureano	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00		8.00		32.00	36.250	1160.01	26.530	X	U 472	902.02	1268.76	1268.76	84.98	322.60	62.12	459.70	809.06
David Marconi	X J DEC A : H		RT OT ST O	8.00	8.00	4.00		8.00	8.00	24.00	43.570	1045.88	32.632	X	U 825	846.32	1788.57	1372.48	113.48	333.98	62.61	510.07	1278.50
Joao S. Neno	X J LBJ A : H		RT OT ST O	8.00	8.00	8.00	8.00			32.00	36.250	1160.00	26.530	X	U 472	902.02	1607.82	1268.76	107.59	313.08	65.70	466.37	1121.45

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 #
42

Week Ending Date
2015-12-26

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							
				20	21	22	23	24	25	26													

Eric Noonan	X J OEA A : H		RT OT ST O	8.00	8.00	8.00	8.00	8.00	40.00	47.070	1882.80	29.840	X U 825 E O	1223.4 4	1953.41	1953.41	123.69	443.11	68.37	635.17	1318.24
Nick Pietrolascovo	X J LBJ A : H		RT OT ST O	8.00			8.00	8.00	24.00	36.250	870.00 0.00 49.73	26.530	X U 472 E O	636.72	1203.06	870.00	81.00	199.01	49.73	329.74	879.32
Edward Riho	X J OEA A : H	1710 LISV FCN	RT OT ST O	8.00	8.00	8.00	8.00	8.00	40.00	47.070	1882.80 141.22 0.00 70.84	30.182	X U 825 E O	1257.6 4	2024.02	2024.02	128.16	390.63	70.84	589.63	1434.39
Patrick A. Streeves	J WDH A : H		RT OT ST O	8.00	8.00			8.00	24.00	43.670	1045.68 130.72 0.00 142.25	36.383	X U 825 E O	945.86	1325.40	1176.40	74.61	167.19	142.25	384.05	942.35
Matthew Voorhees	X J OEA A : H		RT OT ST O	8.00	8.00	8.00		8.00	32.00	47.070	1506.25 141.22 0.00 57.66	30.347	X U 825 E O	1031.8 0	1647.47	1647.47	104.31	343.92	57.66	505.89	1141.58

**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 # 42			Week Ending Date 2015-12-26		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
				20	21	22	23	24	25				26										

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
30th of December, 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

[Signature]
 Signature of Notary Public

12/30, 20 15
 DATE

JAIME B. STONER
 NOTARY PUBLIC OF NEW JERSEY
 ID # 50018312
 My Commission Expires 6/24/2020