

PAYROLL FORM

NORTH DAKOTA DEPARTMENT OF COMMERCE/DCS

SFN 52339 (08/07)

U.S. DEPARTMENT OF LABOR WAGE AND HOUR DIVISION		PAYROLL (For Contractor's Optional Use: See Instructions, Form WH-347 Inst.)					Form Approved Budget Bureau No. 44-R1093																
Name of Contractor <input type="checkbox"/> or Subcontractor <input type="checkbox"/>						Address																	
Payroll No.			For Week Ending			Project and Location			Project or Contract No.														
(1) Name, Address, and Social Security Number of Employee	(2) No. of Withholding Exemptions	(3) Work Classification	ST	(4) Day and Date							(5) Total Hours	(6) Rate of Pay	(7) Gross Amount Earned	(8) Deductions					(9) Net Wages Paid For Week				
			or													FICA	Withholding				Other	Total Deductions	
			OT	Hours Worked Each Day																			
			ST																				
			S																				
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			S																				

Date _____

I, _____, _____
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by _____
_____ on the _____
(Contractor or Subcontractor) (Building or Work)

_____ ; that during the payroll period commencing on
the _____ day of _____, 20____, and ending the _____ day of 20 _____,
all persons employed on said project have been paid the full weekly wages earned, that no
rebates have been or will be made either directly or indirectly to or on behalf of said
_____ from the full weekly wages earned
(Contractor or Subcontractor)

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

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

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

(4) That:

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

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

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

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

(c) EXCEPTIONS

Exception (Craft)	Explanation
Remarks	
Name and Title	Signature
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATE- MENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	