| 05/20/2014 04:25PM   |                 |             | WH - 347 GOVERNMENT REPORT  |             |            |            |            |                              |               |                       |   |               |                 | Revision No: 001<br>Page No: 1 |        |  |
|--|-----------------|-------------|---|-------------|------------|------------|------------|------------------------------|---------------|-----------------------|---|---------------|-----------------|--------------------------------|--------|--|
| SUB-CONTRACT<br>Your Company<br>16824 Avenue of the Fountains<br>Ste 23<br>Fountain Hills AZ 85268-8408<br>Electrical & Mechanical New Office Bu |                 |             | General / Prime Contractor<br>Key Corp<br>500 S Keowee St<br>Ste 225<br>Dayton OH 45405<br>Federal ID : 32-980651 |             |            |            |            | eDeneb 3.0<br>Payroll No : 5 |               |                       | Public Authority<br>State of Ohio Transportation<br>225 High St<br>Ste 300<br>Columbus OH 45600<br>Period Ending : 05/04/2014 |               | Project         | Page  <br>t No: 20-34788       |        |  |
| SSN/Gender/Race/Work Class   |                 |             | Hours Per Day   |             |            |            |            |                              |               |                       |   |               | Tax / Deduction |                                |        |  |
| Name & Address   |                 | Mon<br>4/28 | Tue<br>4/29   | Wed<br>4/30 | Thu<br>5/1 | Fri<br>5/2 | Sat<br>5/3 | Sun<br>5/4                   | Tot Hrs       | Pay Rate              | Gross Earned  | Description   | Amount D        | esc                            | Amount |  |
|  |                 | 0.00        | 0.00  | 0.00        | 0.00       | 0.00       | 0.00       | 0.00                         | 0.00          | 60.000                |   | Fica          | 85.56 Fi        | t                              | 202.50 |  |
| AD100 Black or A   | frican American | 0.00        | 0.00  | 0.00        | 0.00       | 0.00       | 4.00       | 0.00                         | 4.00          | 45.000                |   | State         | 44.92 Lo        | ocal                           | 34.50  |  |
| Adkins, James E SR   |                 | 8.00        | 8.00  | 8.00        | 8.00       | 8.00       | 0.00       | 0.00                         | 40.00         | 30.000                |   | Total Reimb   | 0.00 D          | ues                            | 27.60  |  |
| 2300 S Main St   |                 |             |   |             |            |            |            | Rate Ir                      | ncl Fringes : | 45.925                | 1,380.00  | Child Support | 125.00 Pc       | olitical Action                | 6.90   |  |
| Centerville OH 45459   |                 |             |   |             |            |            |            |                              |               |                       |   |               |                 |                                |        |  |
| Employee Totals This   |                 |             | ct  |             |            |            |            |                              | 44.00         |                       | 1,380.00  | Total Ded     | 546.99          |                                |        |  |
| Employee Totals For A  |                 |             | ojects  |             |            |            |            |                              | 44.00         |                       | 1,380.00  | Fringe        | 732.54 Ne       | et Pay                         | 833.01 |  |
|  |                 |             |   |             |            |            |            |                              |               |                       |   |               | Check No: 2     | 20017                          |        |  |
| XXX-XX-8450/F/Elect Journeyman   |                 | 0.00        | 0.00  | 0.00        | 0.00       | 0.00       | 0.00       | 0.00                         | 0.00          | 50.000                |   | Fica          | 71.30 Fi        | t                              | 133.76 |  |
| AL200 Hispanic   |                 | 0.00        | 0.00  | 0.00        | 0.00       | 0.00       | 0.00       | 0.00                         | 0.00          | 37.500                |   | State         | 34.55 Lo        | ocal                           | 28.75  |  |
| Allison, Joyce E   |                 | 8.00        | 8.00  | 8.00        | 0.00       | 0.00       | 0.00       | 0.00                         | 24.00         | 25.000                |   | Total Reimb   | 0.00 D          | ues                            | 23.00  |  |
| 500 Southview St   |                 |             |   |             |            |            |            | Rate Ir                      | ncl Fringes : | 41.275                | 600.00  | 401k          | 57.50 Pc        | olitical Action                | 5.75   |  |
| Centerville OH 454420  |                 |             |   |             |            |            |            |                              |               |                       |   |               |                 |                                |        |  |
|  | : This Proje    | ct          |   |             |            |            |            | 24.00                        |               | 600.00                | Total Ded   | 371.29        |                 |                                |        |  |
|  | For All Pro     | rojects     |   |             |            |            | 44.00      |                              |               | 1,150.00              | Fringe  | 390.60 Ne     | et Pay          | 778.71                         |        |  |
|  |                 |             |   |             |            |            |            |                              |               |                       |   |               | Check No: 2     | 20018                          |        |  |
|  | Project         | ect Totals  |   |             |            |            | 68.00      |                              |               | 1,980.00 Total Fringe |   | 1,123.14      |                 |                                |        |  |
| All  |                 |             | l Jobs Totals   |             |            |            |            |                              | 88.00         |                       | 2,530.00  |               |                 |                                |        |  |

Date : 05/20/2014

I, David Coggins DO HEREBY STATE:

(1) THAT I PAY OR SUPERVISE THE PAYMENT OF THE PERSONS EMPLOYED BY Your Company ON THE Electrical & Mechanical New Office Building; THAT DURING THE PAYROLL PERIOD COMMENCING ON THE 28 DAY OF Apr, 2014, AND ENDING THE 04 DAY OF May, 2014, 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 Your Company FROM THE FULL WEEKLY WAGES EARNED BY ANY PERSON AND THAT NO DEDUCTIONS HAVE BEEN MADE EITHER DIRECTLY OR INDIRECTLY FROM THE FULL WAGES EARNED BY ANY PERSON, OTHER THAN PERMISSIBLE DEDUCTIONS HAVE BEEN MADE EITHER DIRECTLY OR INDIRECTLY FROM THE FULL WAGES EARNED BY ANY PERSON, OTHER THAN PERMISSIBLE DEDUCTIONS AS DEFINED IN REGULATIONS, PART 3 (29 CFR SUBTITLE A), ISSUED BY THE SECRETARY OF LABOR UNDER THE COPELAND ACT, AS AMENDED (48 STAT. 948,63 STAT. 108, 72 STAT. 967; 76 STAT. 357; 40 U.S.C. 3145), 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 DULY REGISTERED IN A BONA FIDE APPRENTICESHIP PROGRAM REGISTERED WITH A STATE APPRENTICESHIP AGENCY RECOGNIZED BY THE BUREAU OF APPRENTICESHIP AND TRAINING, UNITED STATES DEPARTMENT OF LABOR, OR IF NO SUCH RECOGNIZED AGENCY EXISTS IN A STATE, ARE REGISTERED WITH THE BUREAU OF APPRENTICESHIP AND TRAINING, UNITED STATES DEPARTMENT OF LABOR.

(4) THAT

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

- IN ADDITION TO THE BASIC HOURLY WAGE RATES PAID TO EACH LABORER OR MECHANIC LISTED IN THE ABOVE REFERENCED PAYROLL, PAYMENTS OF FRINGE BENEFITS AS LISTED IN THE CONTRACT HAVE BEEN OR WILL BE MADE TO APPROPRIATE PROGRAMS FOR THE BENEFIT OF SUCH EMPLOYEES, EXCEPT AS NOTED IN SECTION 4 (C) BELOW.

(B) WHERE FRINGE BENEFITS ARE PAID IN CASH

\_\_\_\_ - EACH LABORER OR MECHANIC LISTED IN THE ABOVE REFERENCED PAYROLL HAS BEEN PAID, AS INDICATED ON THE PAYROLL, AN AMOUNT NOT LESS THAN THE SUM OF THE APPLICABLE BASIC HOURLY WAGE RATE PLUS THE AMOUNT OF THE REQUIRED FRINGE BENEFITS AS LISTED IN THE CONTRACT, EXCEPT AS NOTED IN SECTION 4 (C) BELOW.

(C) EXCEPTIONS

REMARKS:

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

NAME AND TITLE: David Coggins SIGNATURE \_

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS 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.