



1170 South Houbolt Road Joliet, IL 60431 (P) 815.744.4200 www.strand.com

April 10, 2023

Mr. Mark Siefert, Director of Public Works City of Crest Hill 1610 Plainfield Road Crest Hill, IL 60403

Re: Crest Hill East Water Reclamation Facility Phosphorus Removal Upgrades

City of Crest Hill, Illinois (City)

Dear Mr. Siefert:

Enclosed is Pay Application No. 9, along with a Certified Payroll for the City's East Water Reclamation Facility Phosphorus Removal Upgrades project. A summary of the Contract status is shown on each enclosed Application for Payment.

Williams Brothers Construction, Inc. (Contractor) is requesting a total of \$193,346.91 for the work performed between March 1 and 31, 2023. Please refer to its breakdowns of values in the enclosed pay application. This value includes material and equipment storage, general overhead and profit, and continuing construction of the project elements including underground chemical and sludge piping. Strand Associates, Inc.® has reviewed the pay application submitted by the Contractor and recommends the Application for Payment Request in the amount of \$193,346.91.

The current total Contract amount is \$4,930,000, and there have been no change orders to date. Total work completed through March 31, 2023, is \$2,098,725.72. A total of \$209,872.57 is being held in retainage, in accordance with the Contract Documents.

Sincerely,

STRAND ASSOCIATES, INC.®

Michael G. Ott, P.E.

Enclosures

APPLICATION FOR PAYMENT

OWNER: City of Crest Hill, Illinois	PROJECT: East WRF Phosphorus Removal Upgrades
CONTRACTOR: Williams Brothers Construction Inc.	CONTRACT: <u>1-2022</u>
FOR PERIOD ENDING: 3/31/2023	PAYMENT APPLICATION DATE: 3/31/2023
PAYMENT APPLICATION NO.: 9	
CONTRACT AMOUNT	
ORIGINAL CONTRACT AMOUNT	\$4,930,000
PLUS: ADDITIONS TO CONTRACT	\$0
LESS: DEDUCTIONS FROM CONTRACT	\$4,930,000
ADJUSTED CONTRACT AMOUNT TO DATE	\$ <u>4,930,000</u>
WORK PERFORMED	
COST OF WORK COMPLETED	\$2,098,725.72
PLUS MATERIALS STORED (ATTACH SCHEE	DULE) \$ \$2,098,725.72
NET AMOUNT EARNED TO DATE	\$2,098,725.72
LESS AMOUNT OF RETAINAGE	\$209,872.57
SUBTOTAL	\$1,888,853.15
LESS PREVIOUS PAYMENTS	\$(1,695,506.24 <u>)</u>
AMOUNT DUE THIS APPLICATION	\$193,346.91
CONTRACTOR's Certification:	
payments received from OWNER on account of Work do discharge CONTRACTOR's legitimate obligations inc Applications for Payment; (2) Title to all Work, materials listed in or covered by this Application for Payment, will Liens, security interests, and encumbrances (except s	of its knowledge, the following: (1) All previous progress one under the Contract have been applied on account to urred in connection with the Work covered by prior and equipment incorporated in said Work, or otherwise pass to OWNER at time of payment free and clear of all uch as are covered by a bond acceptable to OWNER interest, or encumbrances); and (3) All Work covered by intract Documents and not defective.
Required lien waivers attached.	
Dated <u>4/3/2023</u>	Williams Brothers Construction, Inc.
	CONTRACTOR
Ву	Im ala
	(Authorized Signature)
	1 20
Ву	(Print Name)
	(Fint Name)
Payment of the above AMOUNT DUE THIS APPLICATION	DN is recommended.
Dated 4/7, 223	STRAND ASSOCIATES, INC.®
_	Mars / NA
Ву	(Authorized Signature)
	(Authorized digitature)
Ву	MICMAGE OF
•	(Print Name)

APPLICATION FOR PA	YMENT NO. 9	WBCI Invoice No 3 23 553	<u> </u>
TO OWNER: City of Crest Hill			
1610 Plainfield Road			
Crest Hill , Illinois 60403			
FROM CONTRACTOR:	Williams Brothers Construction Inc. ; PO Bo		
	From: Jacob Lee	Ph 309.688.0416; Fax 309.688.0891	
Engineer: Strand Associates, Inc.	, 910 West Wingra Drive, Madison WI 53715 Att'n: Tim Juskiewicz	Ph 608.251.4843 Fax: 608.251.8655	
CONTRACT FOR: General PROJECT: East Water Reclamation OWNER's Contract No. For Work accomplished through the	on Facility Phosphorus Removal Upgrades ENGINEER's Project No.		
Continuation Sheet is attached.			
1. Original Contract Price: .			4,930,000.00
2. Net Change by Change O	orders and Written Amendments (+ or	-)	0.00
3. Current contract Price (1	plus 2):		4,930,000.00
4. Total completed and store	ed to date:		2,098,725.72
b. 10 % of Stored Material			
Total Retainage (Line 5a + 5b)		(209,872.57)
6. Total completed and store	ed to date less retainage (4 minus 5)	<u> </u>	1,888,853.15
7. Less previous Application (Line 6 from prior Certific			(1,695,506.24)
8. DUE THIS APPLICATION	N (6 MINUS 7) :		193,346.91
account of Work done under the Coord CONTRACTOR incurred in conthrough listed in or covered by this Applications, claims, security interests and indemnifying OWNER against any by this application for Payment is idefined in the Contract Documents. Dated March 31, 2023	certifies that (1) all previous progress paymer Contract referred to above have been applied inection with Work covered by prior Applicatio 8 inclusive; (2) title to all Work, materials and ation for Payment will pass to OWNER at time d encumbrances (except such as are covered a such lien, claim, security interest or encumbrance with the Contract Documents a security. PER. TO: March 31, 2023	to discharge in full all obligations and for Payments numbered 1 dequipment incorporated in said Work or otherwise of payment free and clear of all by Bond acceptable to OWNER rance); and (3) all Work covered and not defective as that term is By: CONTRACTOR By: Jacqueline Smith, Treasure	1
Dated:		STRAND ASSOCIATES, INC.	
		BY:	

60	58	57	56 Div. #6	+	54	53	52	51 Div. #5	50	49	48	47	46	45	44	43	42 -	41	40	30 8	38	37	36	35	34	33	32	31	30	29	28	27	26	25		23 Div. #3	22	21	19	18	17	16	15	14		12 Div. #2	11	10	9	00		6 Div #1	- NO	170	CONTINUA
FRP Chemical Tank	FIDE Chamical Tank	Fiberglass Fabrications & Graung	Woods and Plastics	Aluminum Handrails	Aluminum Handrails	Misc. Metals	Misc. Metals	Metals	Base Slabs	Base Slabs	Walls	Walls	Rebar	Rebar	Sludge Tank	Suspended Slab on Grade	Suspended Slah on Grade	Slab on Grade-Stairs	Slab on Grade-Stairs	Base Slabs	Base Slabs	Walls	Walls	Rebar	Rebar	Chemical Phosphorus Str. 8000	Suspended Slab on Grade	Suspended Slab on Grade	Base Slabs	Base Slabs	Walls	Walls	Rebar	Rebar	Oxidation Ditch Str. 4000	Concrete	Site Demo	Sheet 05-D1.01	Sheet 29	Demolition	Sheet 28	Demolition	Sheet 25	Demolition	Sheet 16	Existing Conditions	General Overhead and Profit	Demobilization	Mobilization	Submittal Exchange	Bond and Insurance	General Conditions	DESCRIPTION		CONTINUATION SHEET
	M Plac-Tanks Industries	Williams Brothers Const Inc		L VIIIIams Brothers Const. IIIc.		1	M Pleasant Mount Welding, Inc.	_	L Williams Brothers Const. Inc.	M Ozinga	L Williams Brothers Const. Inc.	M Ozinga	L Mid-State	M Harris			_		M Ozinga	L Williams Brothers Const. Inc.			M Ozinga	L Mid-State	M Harris		L Williams Brothers Const. Inc.	M Ozinga	L Williams Brothers Const. Inc.	M Ozinga		-1	L Mid-State	M Harris			L Williams Brothers Const. Inc.		1 Williams Brothers Const. Inc.	L Williams Broulers Collst. IIIC.		L Williams Brothers Const. Inc.		L Williams Brothers Const. Inc.			Williams Brothers Const. Inc.		SUBCONTRACTOR	SHABITES/					
4,500.00	45.067.00	8.800.00	15.460.00	10,040.00	9,750.00	1,360.00	17,930.00	200	21,629.75	7,530.20	36,254.00	7,748.70	6,383.26	11,783.05		1,529.75	119.60	377.25	67.85	5,533.25	2,310.35	16,628.50	1,952.70	3,067.79	5,662.93		21,626.00	1,835.40	22,017.00	11,036.55	134,708.00	16,302.40	18,928.95	34,941.47			7,927.00		10.975.00	1,970.00	1 070 00	34,190.00		36,985.00			411,800.49	20,000.00	200,000.00	6,000.00	200,000.00	0.00	****	SCHEDULED	A A
0.00	0.00	0.00	1.110.00	0.00	9,750.00	0.00	8,000.00	0 00	0.00	0.00	0.00	0.00	0.00	401.40		0.00	0.00	0.00	0.00	5,533.25	2,310.35	16,628.50	1,952.70	2,613.56	5,662.93		0.00	0.00	22,017.00	11,036.55	134,708.00	16,302.40	14,290.82	32,978.57			792.70		0.00	0.00	000	0.00		0.00			158,432.65	0.00	100,000.00	6,000.00	200,000.00		PREVAPPL TH		Application No. 9 APPL. DATE: Mar
	45,067.00																																				5,548.90					5,128.50					16,500.00						THIS PERIOD ST		9 March 31, 2023
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4,500.00	0.00	8,800.00	14,350.00		15.840.00	00.0	1 367 7.00	3 277 00	21,629,75	7,000.20	7 530 20	26.254.00	5,383.26	11,381.65		1,529.75	119.60	377.25	67.85	0.00	0.00	0.00	0.00	454.23	0.00	8	21,626,00	1,835.40	0.00	0.00	0.00	0.00	4,638.13	1,962.90			1,585.40		10,975.00		1.970.00	00.100,67	20 061 60	00,000.00	36 98 00		236,867.84	20,000.00	100,000.00	0.00	0.00				Ç.S
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0.00	500.00	0%	0.00			0.00	500.00	_	Electrical Demo	112
0.00	2,000.00	0%	0.00			0.00	2,000.00	M Elliot Electric	Electrical	11
									Sludge Pump Building Str. 23000	110
0.00	1,000.00	0%	0.00			0.00	1,000.00		Start Up	109
0.00	9,000.00	0%	0.00			0.00	9,000.00	L Elliot Electric	Electrical Install	108
0.00	8,000.00	0%	0.00			0.00	8,000.00	M Elliot Electric		107
									Chemical Phosphorus Str. 8000	106
0.00	500.00	0%	0.00			0.00	500.00	L Elliot Electric		105
0.00	22,000.00	0%	0.00			0.00	22,000.00	L Elliot Electric	Electrical Install	104
50.00	2,000.00	20%	500.00			500.00	2,500.00	L Elliot Electric		103
0.00	15,000.00	0%	0.00			0.00	15,000.00	M Elliot Electric	Electrical	102
									n Ditch Str. 4000	101
0.00	13,399.00	0%	0.00			0.00	13,399.00	Concentric Integration	Instrumentation	100
0.00	23,144.00	0%	0.00			0.00	23,144.00	Concentric Integration	Control Panels	99
0.00	0.00	2						Concentric Integration	Equipment	98
0.00	74,127.00	0%	0.00			0.00	74,127.00	Concentric Integration	Motor Control Centers/VFDs	97
0.00	74 427 00	000	9			2	74.40	Concentric Integration	Control and Instrumentation	96
0.00	37,270.00	0%	0.00			0.00	37,270.00	Concentric Integration	Enhancement Time	95
0.00	4,320.00	0%	0.00			0.00	4,320.00	Concentric Integration	O&M Drawings	94
0.00	40,210.00	0%	0.00			0.00	40,210.00	Concentric Integration	PLC, OIT & SCADA Programming	93
0.00	38,300.00	0%	0.00			0.00	38,300.00	Concentric Integration	Control Panel Design	92
2,420.13	16,1/8./5	60%	24,201.25			24,201.25	40,380.00	Concentric Integration	Project Management	91
24./5	75 775 75	20%	247.50			247.50	2,450.00	Concentric Integration	Project Initiation	90
0.00	6,130.00	0%	0.00		0.00	0.00	6,130.00	Energenecs	O&M, Start Up, Training	89
331.05	7,724.50	30%	3,310.50		3,310.50	0.00	11,035.00	Energenecs	SCADA Integration Programming	88
1,219.50	0.00	100%	12,195.00	0	12,195.00	0.00	12,195.00	Energenecs	Instruments (ISO Flowmeterand Vega Puls Radar)	87
3,194.00	0.00	100%	31,940.00	0	31,940.00	0.00	31,940.00	Energenecs	Collection System Diversion Structure Control Panel	
									Electrical	Div. #26
0.00	10,500.00	0%	0.00			0.00	10,500.00			84
0.00	378,263.00	0%	0.00			0.00	378,263.00	M Metropolitan Pump Company	mical Phosphorus Removal Building	
										82 Div. #13 St
0.00	90.00	0%	0.00			0.00	90.00			82
68.50	126.32	84%	684.95			684.95	811.27		snc	80
0.00	30.00	0%	0.00			0.00	30.00			79
0.00	120.00	0%	0.00			0.00	120.00	M Williams Brothers Const. Inc.	hers	
										Div. #10
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0.00	5,000.00	0%	0.00			0.00	5.000.00	M RP Coatings		75 098821
									n Structure Manhole	74
0.00	3,000.00	0%	0.00			0.00	3.000.00			73 099100
0.00	300.00	0%	0.00			0.00	300.00	M RP Coatings	Painting	72 099100
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0.00	200.00	0%	0.00			0.00	200.00	M RP Coatings		63 099100
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		ECT NO.:	ARCHITECT'S PROJ	3	March 31, 2023	APPL. DATE: N				

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172	171	170	169	168	167	166	165	164	163	162	161	160	159		157 Div. #33	156	154	153	152	151 Div. #32	150	149	148	147	146	144	143	142		140 Div. #31	139	138	130	135	134	133	132	131	130	129	128	127	126	124	123	122	121	120	119	118	117	116	115 NO	WEIT	CONTIN
Site DIP NPW	Site Valve & Material Man Hole 1&2	Site Valve & Material Man Hole 1&2	Site Process Piping Storm	Site Process Piping Storm	Cutting & Capping	Cutting & Capping	Site Proc Piping PRC	Site Proc Piping PRC	Mobilization	Overhead and Profit	Bypass Pumping	Start-Up & Owner Training	Glass-Lied Steel Sludge Storage Tank		Utilities	Speding	Sidewalks	Paving	Paving	Exterior In	Spoils Offsite	Chemcial Tank Backfill	Chemcial Tank Excavation	Storage Tank Backfill	Storage Tank Excavation	Oxidation Ditch Excavation	Site Grading	Silt Fence		Earthwork	Office	Misc. Job Expenses	Supervision	Arc Hash System	Fire Alarm	Fire Alarm	Lighting	Lighting	Lighting Protection	Lighting Protection	Site-Poles/Feeders	Site-Poles/Feeders	Site-Handholes	Sito Handholes	Generator	Start Up	Electrical Install	Electrical	Structure 98	Electrical Labor	Electrical Install	Electrical	Sludge Storage Tank Str. 25000		CONTINUATION SHEET
L G.A Rich & Sons, Inc	M G.A Rich & Sons, Inc	L G.A Rich & Sons, Inc	M G.A Rich & Sons, Inc		L	L G.A Rich & Sons, Inc	_	_	G.A Rich & Sons, Inc	G.A Rich & Sons, Inc	L Williams Brothers Const. Inc.	L Cady Aquastore	L Cady Aquastore	M Cady Aquastore		M/L Williams Brothers Const. Inc.	Williams Brothers Const. Inc.		L		L Concord Excavating	L Concord Excavating	L Concord Excavating	L Concord Excavating	L Concord Excavating	Concord Excavating	L Concord Excavating	L Concord Excavating	L Concord Excavating			M Elliot Electric	L Elliot Electric	IN Elliot Electric	\perp	M Elliot Electric		M Elliot Electric	L Elliot Electric	M Elliot Electric		M Elliot Electric		M Elliot Electric	I Elliot Electric	1	L Elliot Electric	M Ellot Electric		L Elliot Electric		M Elliot Electric	SUBCONTRACTOR	SUPPLIER/	
7,500.00	11,300.00	13,000.00	3,900.00	2,000.00	7,000.00	2,000,00	1,200.00	18,000.00	30,000.00	00,000,00	20,000.00	2,000.00	132,000.00	321,000.00		1,200.00	4.013.00	2 976 00	31 000 00	100000	26,000.00	5,000.00	8,000.00	5,000.00	21,000.00	27,000.00	32,000.00	3,000.00	11,000.00		10,000.00	13,460.00	46,000.00	500.00	2,500.00	3 500.00	10,000.00	6,500.00	12,500.00	11,180.00	23,000.00	14,000.00	2,000.00	1.000.00	12.500.00	19 760 00	1,000,00	34,000.00	10000	500.00	5,500.00	2,000.00	VACCO.	C	
5,625.00	7,910.00	6,500.00	0.00	0.00	0.00	0.00	1,200.00	200.00	12,000.00	47,918.00	47 049 00	0.00	0.00	0.00		0.00	0.00	0.00	0.00	9	20,000.00	0.00	8,000.00	0.00	0.00	22,950.00	22,000.00	3,000.00	8,430.00		2,250.00	0.00	10,500.00	0.00	0.00	0.00	0.00	0.00	500.00	0.00	1,500.00	1,500.00	0.00	0.00	0.00	0.00	0.00	0.00	9	0.00	0.00	0.00	1.0	FW MODEL TH	Application No. 9 APPL. DATE: March 31, 2023
	1,130.00	1,300.00	200000		1,400.00	3,000.00	3 000 00	14,400.00	14,400,00	18,000,00	13 610 00																				500.00		1,500.00																					FORESTO MAIRINALO	ch 31, 2023
5,625.00	9,040.00	7,800.00	7 800 00	0.00	0.00	1 400 00	3,000,00	1 200 00	14 400 00	30,000,00	60.528.00	0.00	0.00	0.00		0.00	0.00	0.00	0.00	0.00	20,000.00	0.00	8,000.00	0.00	0.00	22,950.00	22.000.00	6,000,00	8,430.00		2,750.00	0.00	12,000.00	0.00	0.00	0.00	0.00	0.00	500.00	0.00	1,500.00	1,500.00	0.00	0.00	0.00	0.00	0.00	0.00	0 00	0.00	0.00	0.00		& STORED	e e
100%		80%	60%	0%	0%	200%	20%	100%	80%	100%	48%	0%	700	0%	2	%0	0%	0%	0%	0%	//%	770/	100%	0%	0%	85%	100%	14%	77%		28%	0%	26%	0%	0%	0%	0%	0%	4%	0%	7%	11%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%		Complete	2
0.00	2,200.00	3,200.00	5,300.00	3 900 00	12,000.00	5,600,00	12 000 00	0.00	3 600 00	0.00	65 572.00	00,000,00	3,000.00	321,000.00		1,200.00	4,013.00	2,976.00	31.000.00	19 000 00	6,000.00	5,000.00	0.00	5,000.00	21,000.00	4,050.00	0.00	37 000 00	2,5/0.00	0 770 00	7,250.00	13,460.00	34,000.00	500.00	2,500.00	3,500.00	500.00	6,500.00	12,000.00	11,180.00	21,500.00	12,500.00	2,000.00	1,000.00	12,500.00	19,760.00	1,000.00	24.000.00	15 000 00	500.00	5,500.00	2,000.00		TOFINISH	
200.00	904.00	700.00	780 00	0.00	0.00	140 00	300.00	120.00	1 440 00	3,000,00	6.052.80	0.00	0.00	0.00	8	0.00	0.00	0.00	0.00	0.00	2,000.00	3 000 00	800.00	0.00	0.00	2,295.00	2,200.00	600.00	300.00	220	275.00	0.00	1,200.00	0.00	0.00	0.00	0.00	0.00	50.00	0.00	150.00	150.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		5	Delawace

	199	198	197	196	195	194	193	192	191	190	189	188 Div. #40	187	186	185	184	183	182	181	180	179	178	177	176	175	174	z		CON
Process Valves	Process Valves	Start-Up & Owner Training	Weir Gate	Weir Gate	Start-Up & Owner Training	Sluice Gate 16" Opening	Sluice Gate 16" Opening	Start-Up & Owner Training	Sluice Gate 20" Opening	Sluice Gate 20" Opening	Oxidation Ditch bldg 4000	Process Inte	Site DIP Drain Lines	Site DIP Drain Lines	Site DIP SMS	Site DIP SMS	Site DIP SMD	Site DIP SMD	Site DIP TDSL	Site DIP TDSL	Site DIP RAS	Site DIP RAS	Site DIP Plant Inf	Site DIP Plant Inf	Site DIP Domestic	Site DIP Domestic	NO DESCRIPTION	TEM	CONTINUATION SHEET
M G.A Rich & Sons, Inc	L G.A Rich & Sons, Inc	L RW Gate	L Williams Brothers Const. Inc.	M RW Gate	L RW Gate	L Williams Brothers Const. Inc.	M RW Gate	L RW Gate	L Williams Brothers Const. Inc.	M RW Gate			M G.A Rich & Sons, Inc	L G.A Rich & Sons, Inc	M G.A Rich & Sons, Inc	L G.A Rich & Sons, Inc	M G.A Rich & Sons, Inc	L G.A Rich & Sons, Inc	M G.A Rich & Sons, Inc	L G.A Rich & Sons, Inc	M G.A Rich & Sons, Inc	L G.A Rich & Sons, Inc	M G.A Rich & Sons, Inc	L G.A Rich & Sons, Inc	M G.A Rich & Sons, Inc	L G.A Rich & Sons, Inc	SUBCONTRACTOR	SUPPLIER/	
50,000.00	15,000.00	840.00	3,500.00	13,530.00	840.00	3,500.00	16,590.00	840.00	3,500.00	17,990.00			25,000.00	50,000.00	25,000.00	35,000.00	25,000.00	35,000.00	30,000.00	40,000.00	20,000.00	20,000.00	10,000.00	15,000.00	1,000.00	7,500.00		SCHEDULED	
30,000.00	1,500.00	0.00	0.00	13,530.00	0.00	0.00	16,590.00	0.00	0.00	9,350.00			10,000.00	2,500.00	12,000.00	0.00	12,000.00	1,750.00	30,000.00	2,000.00	20,000.00	18,000.00	10,000.00	11,250.00	0.00	0.00	PREV APPL TH	*WORK COMPLE	Application No. 9 APPL. DATE: Marc
														12,500.00				8,750.00		14,000.00							THIS PERIOD S		March 31, 2023
30,000.00 60%	1,500.00 10%		0.00	10			_			,			10,000.00 40%														& STORED Compl	MATERIALS TOTAL COMPL %	ARCHITECT'S PROJECT NO.:
20,000.00	13,500.00	840.00	3,500.00	0.00	840.00	3,500.00		28	3,500.00	8,640.00			00.000,61	35,000.00	13,000.00	35,000.00	13,000.00	24,500.00	0.00	24,000.00	0.00	2,000.00	0.00	3,750.00	1,000.00	7,500.00	TOFINISH	BALANCE IF	
3,000.00	150.00	0.00	0.00	1,353.00	0.00	0.00	1,659.00	0.00	0.00	935.00			00.000,1	1,500.00	1,200.00	0.00	1,200.00	1,050.00	3,000.00	1,600.00	2,000.00	1,800.00	1,000.00	1,125.00	0.00	0.00		THIANAGE	

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DESCRIPTION SUPPRIES	Discretion Structure					
INTERNA DESCRIPTION SUPPRIETED	Discretain Structure		- 1	_		
INTERIM DESCRIPTION SUPPRIETY	Diversion Structure					
INTERM DESCRIPTION SUPPRIETY	Disciscration Studential Subsciential Subsc		10	0.00		0.00
INTERM DESCRIPTION SUPPRIEST	DESCRIPTION SUBCOMPTACTION WARD			3,60	3,600.00	3,600.00 3,600.00 100%
DESCRIPTION SUPPLIER	DESCRIPTION				0.00	0.00
INTERM DESCRIPTION	DESCRIPTION				0.00	0.00 0.00 0%
IEEM DESCRIPTION SUPPLER CALLUE	SUPPLIERY SUPPLIERY SCHEDULEDS			0.00		0.00
NEM DESCREPTION SUPPLIES	DESCRIPTION SUPPLIERY					
NEW DESCRIPTION SUBCONTRACTOR WARD	DESCRIPTION SUPPLIERS	0,023.00		6.00	0.00	0.00
NEEM DEESCRIPTION SCHEDULIES	DESCRIPTION SUPPLIED	1,538.46		1,03	1,338.46	1,336.46
INTERM DESCRIPTION SCHEDULERY SCHEDULERY	DESCRIPTION SCHEDITED	2,840.00			1 520 16	1 520 16
INTERM DESCRIPTION SUPPLIER	DESCRIPTION SUPPRIER		. ~	0.00		0.00
INTERM DESIGNATION DESIGNATION DESIGNATION DESIGNATION DESIGNATION DESIGNATION DESIGNATION DESIGNATION DEVERSION STRUCTURE 18,300.00 L. Williams Brothers Const. Inc. 3,500.00 Sind-Gate Sind-Gate M. RW Gate 4,000.00 L. Williams Brothers Const. Inc. 3,500.00 L. Williams Brothers Const. Inc. 1,000.00 L	DEEXCRIPTION SUPPREPA			/8,391.54	1.54	1.54 /6,391.34 9276
IEEM DESCRIPTION SUPPLIED SCHEDULED	DESCRIPTION SUPPRIER	2,139.00			0.00	0.00
INTERM	DESCRIPTION SUPPRIER	Inc		0.00		0.00
ITEM DESCRIPTION	DESCRIPTION SUPPRIER WALUE			34,/94.89	4.89	34,794.89 100%
ITEM	DESCRIPTION SUBSCIENT SCHE	6,200.00		21.10	0.00	0.00
NICH DESCRIPTION SUBCONTRACTOR	DESCRIPTION SUPPLIER SCHE Diversion Structure SUBCONTRACTOR VAI Sluice Gate L Williams Brothers Const. Inc. SIGH Gate Silde Gate L Williams Brothers Const. Inc. Side Gate Silde Gate L Williams Brothers Const. Inc. Hand RW Gate Silde Gate L Williams Brothers Const. Inc. Hand RW Gate Valves L Williams Brothers Const. Inc. Hand RW Gate Portable Operator L RW Gate And RW Gate Valves L ARW Gate And RW Gate And RW Gate Process Valves M LAI AND RW Gate AND RW Gate <td></td> <td></td> <td></td> <td>0.00</td> <td>0.00</td>				0.00	0.00
ITEM	DESCRIPTION SUPPLIER SCHE Diversion Structure NA SUBCONTRACTOR WA Sluice Gate M RW Gate WA Sluice Gate L Williams Brothers Const. Inc. SIde Gate L Slade Gate L Williams Brothers Const. Inc. M RW Gate Slade Gate L Williams Brothers Const. Inc. L Williams Brothers Const. Inc. Slade Powner Training L RW Gate W RW Gate A RC RW Gate A RC R RW Gate A RC A RC R R R		- 1 -	00,00	0.00	0.00
ITEM	DESCRIPTION SUBPRIERY SCHE				15,000.00	15,000.00 6E 800.00
ITEM	DESCRIPTION SUPPRIERY SCHED				0.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0
ITEM DESCRIPTION SUPPLIER SCHED	DESCRIPTION SUPPLIER SCHED Diversion Structure WAU SUBCONTRACTOR VAL Sluice Gate M RW Gate 11 Sluice Gate L Williams Brothers Const. Inc. 31 Slar-Up & Owner Training L RW Gate 14 Star-Up & Owner Training L RW Gate 14 Star-Up & Owner Training L RW Gate 14 Protable Operator L RW Gate 14 Slide Gate L Williams Brothers Const. Inc. 32 Protable Operator L RW Gate 14 Slide Gate L Williams Brothers Const. Inc. 32 Protable Operator M RW Gate 4 Chemical Building Str. 2000 L GA Rich & Sons, Inc 1 Process Valves M GA Rich & Sons, Inc 1 Process Valves M GA Rich & Sons, Inc 7 Process Valves M GA Rich & Sons, Inc 3 Process Valves M		,, ,		0.00	0.00
ITEM	DESCRIPTION DESCRIPTION DIVERSION STRUCTURE Sluice Gate Sluice Gate Sluice Gate Sluice Gate Sluice Gate Slide Gate Sl	0		0.00	04,300.00	04,300.00
ITEM	DESCREPTION SCHE				64 500 00	64.600.00
ITEM DESCRIPTION SUPCISION SCHEDULED	DESCRIPTION SUPPRIERY SCHEDULETS	2,000.00		0.00	0.00	6.00
ITEM DESCRIPTION SUPPLIER NO. DESCRIPTION SUPPLIER VALUE	DESCRIPTION SCHEBULER) SCHEBULER)			0.00		0.00
ITEM DESCRIPTION SUPPLIER	DESCRIPTION SCHEBILERY SCHEBILERY Diversion Structure SUBCONTRACTOR VALUE Sluice Gate M RW Gate 18,300.00 Sluice Gate L Williams Brothers Const. Inc. 3,500.00 Slar-Up & Owner Training L RW Gate 18,000.00 Slide Gate L Williams Brothers Const. Inc. 3,500.00 Slide Gate L RW Gate 18,080.00 Start-Up & Owner Training L RW Gate 3,500.00 Start-Up & Owner Training L RW Gate 4,400.00 Portable Operator L RW Gate 206.502.54 Valves L G.A Rich & Sons, Inc 11,000.00 Process Valves L G.A Rich & Sons, Inc 10,300.00 Process Valves L G.A Rich & Sons, Inc 70,000.00 Process Valves L G.A Rich & Sons, Inc 30,000.00 Process Valves L G.A Rich & Sons, Inc 111,000.00 Process Valves M G.A Rich & Sons, Inc 111,000.00 <td></td> <td>+</td> <td>00,790.00</td> <td>00,730.00</td> <td>200</td>		+	00,790.00	00,730.00	200
NO DESCRIPTION SUPPLIERY WALUE	DESCRIPTION SUPPLIER/ SUBSCONTRACTOR SCHEBBLEBY Diversion Structure M SUBSCONTRACTOR VALUE Sluice Gate M RW Gate 18,300.00 Sluice Gate L Villiams Brothers Const. Inc. 3,500.00 Slide Gate L RW Gate 18,300.00 Slide Gate L RW Gate 18,080.00 Slide Gate L RW Gate 3,500.00 Slide Gate L RW Gate 3,500.00 Slide Gate L RW Gate 40,00 Slart-Up & Owner Training L RW Gate 3,500.00 Valves M RW Gate 4,400.00 Valves L GA Rich & Sons, Inc 11,000.00 Chemical Building Str. 2000 L GA Rich & Sons, Inc 13,500.00 Process Valves M GA Rich & Sons, Inc 10,300.00 Process Valves L GA Rich & Sons, Inc 30,000.00 Process Valves L GA Rich & Sons, Inc 30,000.00 Process Valv	00 302 90	+	86 705 00	200 00 207 00	000
ITEM DESCRIPTION SUPPLIED SUPPLIED	DESCRIPTION SCHEBURED		+	0.00		
DESCRIPTION SCHEBUERY SCHEBUERY	DESCRIPTION SCHEBULED		+	15,762.51	0.00	0.00
Diversion Structure	DESCRIPTION SCHEBULED	1110000	T	46 1000 004	15 793 31	
DESCRIPTION SUPPLIERY SCHEBUEERY	DESCRIPTION SUPPLIERY SCHEDILEBY Diversion Structure SUBCONTRACTOR WALUE Sluice Gate M RW Gate 18,300.00 Sluice Gate L Williams Brothers Const. Inc. 3,500.00 Slide Gate L RW Gate 18,080.00 Slide Gate L RW Gate 18,080.00 Slide Gate L Williams Brothers Const. Inc. 3,500.00 Start-Up & Owner Training L RW Gate 4,400.00 Portable Operator L RW Gate 4,400.00 Valves M RW Gate 4,400.00 Valves L GA Rich & Sons, Inc 11,000.00 Process Valves L GA Rich & Sons, Inc 10,300.00 Process Valves L GA Rich & Sons, Inc 30,000.00 Process Valves L GA Rich & Sons, Inc 70,000.00 Sludge Pump Building Str. 23000 L GA Rich & Sons, Inc 30,000.00 Process Valves L GA Rich & Sons, Inc 30,000.00		+	00,000.00		00,000.00
DESCRIPTION SUPPLIERY SCHEDULED	DESCRIPTION SCHEDULED		T	80,000,00	20.08	80 000 00 72%
ITEM DESCRIPTION SUPPLIER/ SCHEDURIED	SUPPLIER/ SCHEBURISM SCHEBURISM Diversion Structure SUBCONTRACTIOR WALUE		1		000	
DESCRIPTION SUPPLIER	SUPPLIER/ SCHEBURTION SCHEBURTION SCHEBURTION		T	50,000.00	30,000.00	30,000,00
ITEM DESCRIPTION SUPPLIER/ SCHEDULER/ WALUE	DESCRIPTION SCHEBULER) SCHEBULER)		T	0.00		
ITEM DESCRIPTION SUPPLIERY SCHEBULERY	DESCRIPTION SCHEBULED		1			
NO DESCRIPTION SUPPLIER	DESCRIPTION SUPPLIER) SCHEDILED Diversion Structure M SUBCONTRACTOR VALUE Diversion Structure M RW Gate 18,300.00 Sluice Gate L Williams Brothers Const. Inc. 3,500.00 Sluice Gate L RW Gate 480.00 Slide Gate M RW Gate 18,080.00 Slide Gate L Williams Brothers Const. Inc. 3,500.00 Slart-Up & Owner Training L RW Gate 40,000.00 Start-Up & Owner Training L RW Gate 4,400.00 Portable Operator M RW Gate 4,400.00 Valves M LW Gate 11,000.00 Chemical Building Str. 8000 L G.A Rich & Sons. Inc 13,500.00 Process Valves L G.A Rich & Sons. Inc 13,500.00		1	0.00	0.00	0.00
ITEM DESCRIPTION SUPPLIER) SCHEDULED	DESCRIPTION SUPPLIER SCHEDILEID Diversion Structure SUBCONTRACTOR WALUE Sluice Gate M RW Gate 18,300.00 Sluice Gate L Williams Brothers Const. Inc. 3,500.00 Start-Up & Owner Training L RW Gate 18,080.00 Slide Gate L Williams Brothers Const. Inc. 3,500.00 Slide Gate L Williams Brothers Const. Inc. 3,500.00 Start-Up & Owner Training L RW Gate 40.00 Start-Up & Owner Training L RW Gate 4,400.00 Start-Up & Owner Training L RW Gate 4,400.00 Valves M RW Gate 4,400.00 Chemical Building Str. 8000 L GA Rich & Sons, Inc 11,000.00		+	0.00		0.00
ITEM	DESCRIPTION SUPPLIER SCHEDILEIX Diversion Structure SUBCONTRACTOR VALUE Sluice Gate M RW Gate 18,300.00 Sluice Gate L Villiams Brothers Const. Inc. 3,500.00 Start-Up & Owner Training L RW Gate 18,000.00 Slide Gate L Williams Brothers Const. Inc. 3,500.00 Slide Gate L Williams Brothers Const. Inc. 3,500.00 Slide Gate L Williams Brothers Const. Inc. 3,500.00 Start-Up & Owner Training L RW Gate 4,400.00 Valves M RW Gate 4,400.00 Valves L GA Rich & Sons, Inc 11,000.00		_	000	0.00	
ITEM	SUPPLIER SCHEDULER		-	330.00	0,000.00	0,000.00
ITEM	SUPPLIER/ SCHEBULED Diversion Structure SUB-CONTRACTOR WALUE		T	42.8	6 050 00	6 050 00
ITEM DESCRIPTION SUPPLIERY SCHEBBEED	DESCRIPTION SUPPLIER) SCHEDILED Diversion Structure SUBCONTRACTOR VALUE Diversion Structure M RW Gate 18,300.00 Sluice Gate L Williams Brothers Const. Inc. 3,500.00 Sluice Gate L RW Gate 40,000 Sluide Gate L RW Gate 18,300.00 Slide Gate L RW Gate 18,080.00 Slide Gate L Williams Brothers Const. Inc. 3,500.00 Slide Gate L Williams Brothers Const. Inc. 3,500.00 Slide Gate L RW Gate 3,500.00	4,400.00	T	4,400.00	T, T00:00	100.00
NO DESCRIPTION SUPPLIER/ NO Diversion Structure	SUPPLIER/ SCHEDULED	040.00	T	0:80	4 400 00	A A00 00 400%
ITEM	SUPPLIER SCHEDILED		T	0.00		0.00
ITEM	SUPPLIER/ SCHEBULED DESCRIPTION SUBCONTRACTOR WALUE Diversion Structure M RW Gate 18,300.00		T	0.00	0.00	0.00
ITEM	SUPPLIER/ SCHEDILED	18	1	18.080.00	18,080.00	18,080.00
ITEM	SUPPLIER: SCHEOULED:			0.00		0.00
ITEM	SUPPLIER SCHEDLEED			0.00	0.00	
ITEM SUPPLIER SUPPLIER SCHEDULED NO DESCRIPTION SUBCONTRACTOR VALUE Diversion Structure	DESCRIPTION SUBCONTRACTOR VALUE Diversion Structure	18,300.00		18,300.00	18,300.00	18,300.00 100%
DESCRIPTION SUBDOUTRACTOR VALUE	DESCRIPTION SUPPLIER) SCHEDULED VALUE					
THE INCOMES OF THE PROPERTY OF		ACTOR VALUE	R	PREVAPPL THIS PERIOD STORED	THIS PERIOD STORED & STORED	THIS PERIOD STORED
	SONTINUATION SHEET		÷	APPL. DATE: March 31, 2023	Warch 31, 2023	March 31, 2023 ARCHIECT OF ROSECT NO.

264	263	262	261	260	259	258	257	256	255				
										NO.	ITEM		CONTINUE
													CONTINUATION SHEET
									Chan	DESC			4
									Change Orders	DESCRIPTION			
TOTAL	Total C									SUBCC	/ABITAdnS		
REVISED (Total Change Orders									SUBCONTRACTOR	ER/		
CONTRACT	S									æ			
AMQ 2											SCH		
TOTAL REVISED CONTRACT AMC 4,930,000.00	0.00									VALUE	SCHEDULED *WOR		
										PREV AP	*	APPL. DATE:	Application No.
1,883,895.82	0.00										60		n No. 9
214,829.90										THIS PERIOD STORED	K COMPLETED	March 31, 2023	
9.90	0.00									30	-V MA	23	
0.00	0.00									ORED	MATERIALS		
										& STORED	TOTALO	ARCHITECT'S PROJECT NO.:	TEX. 10:
2,098,725.72	0.00											T'S PROJ	_
0.43	0.00		0%	0%	0%	0%	0%	0%		Complete	%	ECT NO.:	March 31, 2023
2,831,274.28	0.00	0%	0.00	0.00	0.00	0.00	0.00	0.00		TOFINISH	BALANCE		23
209,872.57	0.00										RETAINAGE		

202	291	290	289	288	287	286	285	284	283	282	281	280	279	278	277	276	275	274	273	272	271	270	269	268	267	266	265	ONO	CONTINUATION SHEET
Totals	-																									Summary by Subcontract		DESCRIPTION	HEET
	Williams Brothers Construction	Zendaver Signs	Xylem Water Solutions	RW Gate Company	RP Coatings	G.A. Rich & Sons, Inc.	Pleasant Mount Welding, Inc	Plas-Tanks Industries Inc.	Peterson & Matz, Inc	Ozinga Bros, Inc/Narvick	Mona Composite	Mid-State Steel Co, Inc	Metropolitan Pump Co.	LAI, Ltd.	Harris Rebar	Golden Railing	Glander Paving Co.	Evoqua Water Technologies	Energenecs	Ellitott Electric, Inc	Drydon Equipment Inc.	Concentric Integration	Concord Excavating	Cady Aquastore	Boerger LLC			SUBCONTRACTOR	
4.930.000.00	1,320,223.99	811.27	148,000.00	93,090.00	42,860.00	966,800.00	11,930.00	45,067.00	30,000.00	51,879.75	15,460.00	28,380.00	378,263.00	206,502.54	52,387.45	9,750.00	50,000.00	62,000.00	61,300.00	301,400.00	65,500.00	273,600.00	171,000.00	455,000.00	88,795.00			SCHEDULED	
1,883,895.82	647,712.10	684.95	130			374,70	8,653.00		15,000.00	31,602.00		_		189,302.54	39,042.90	9,750.00	0.00	55,800.00	0.00	16,750.00	64,500.00	24,448.75	90,380.00	0.00	86,795.00			PREV APPL	Application No. APPL. DATE:
214,829.90	27,177.40					93,14	0.00	45,067.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00		0.00	47,445.50	2,000.00	0.00	0.00	0.00	0.00				THIS PERIOD	9 March 31, 2023
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00			STORED	
2,098,725.72	674,889.50	684.95	130,507.20	80,250.00	0.00	467,843.00	8,653.00	45,067.00	15,000.00	31,602.00	1,110.00	16,904.37	0.00	189,302.54	39,042.90	9,750.00	0.00	55,800.00	47,445.50	18,750.00	64,500.00	24,448.75	90,380.00	0.00	86,795.00	20.00		& STORED	ARCHITECT'S PROJECT NO.:
42.57%	51%	84%	88%	86%	000	48%	/3%	100%	50%	61%	7%	60%	0%	92%	/5%	100%	0%	90%	11%	6%	98%	9%	53%	0%	90%	000		Complete	JECT NO.:
2,831,2/4.28	645,334.49	126.32	17,492.80	12,040.00	42,000.00	498,957.00	3,277.00	0.00	15,000.00	20,277.75	14,350.00	11,4/5.63	3/8,263.00	17,200.00	13,344.55	0.00	50,000.00	6,200.00	13,854.50	282,650.00	1,000.00	249,151.25	80,620.00	455,000.00	2,000.00	3 000			DATAMA
705,872.57	67,488.95	68.50	13,000.72	0,020.00	0.00	46,784.30	865.30	4,506.70	1,500.00	3,160.20	111.00	1,690.44	0.00	18,930.25	3,904.29	9/5.00	0.00	5,580.00	4,/44.55	1,8/5.00	6,450.00	2,444.88	9,038.00	0.00	0,079.00	0 670 50		C. C	0 1 1 2 2 2 2 2 2 3 2 3 2 3 3 3 3 3 3 3 3

Partial WAIVER	OF	LIEN
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Application No.

STATE OF ILLINOIS}

March 31, 2023

PEORIA COUNTY

TO ALL WHOM IT MAY CONCERN:

WHEREAS, we the undersigned, WILLIAMS BROTHERS CONSTRUCTION INC. have been employed by

City of Crest Hill to furnish labor and/or material for the building known as:

East Water Reclamation Facility Phosphorus Removal Upgrades

Situated on Lot:

2250 North Broadway Street

Crest Hill, IL 60403

in the City of Crest Hill, County of Will and State of Illinois.

NOW, THEREFORE, KNOW YE, That the undersigned, for and in consideration of

One Hundred Ninety Three

Thousand Three Hundred Forty Six and 91/100

\$193,346.91

Dollars,

and other good and valuable considerations, the receipt whereof is hereby acknowledged, do we hereby waive and release any and all lien or claim or right of lien on said above described building and premises under "An Act to Revise the Law in Relation to Mechanic's Liens," approved May 18, 1903, in force July 1, 1903 together with all amendments thereto and all the lien laws of the State of Illinois on account of labor or materials, or both, furnished by the undersigned to or on account of the said City of Crest Hill

for said building through

March 31, 2023

GIVEN under our hands and sealed this day and year first above written.

Subscribed and sworn to before me this date

"OFFICIAL SEAL" JACOB K. LEE

Notary Public, State of Illinois

My Commission Expires 06-15-2025

WILLIAMS BROTHERS CONSTRUCTION INC. (SEAL)

(SEAL)

Amounts requested on our Application No.

Project: Crest Hill	Vendor			
WA	Value	VI-I	Scheduled	
WAIVER OF LIEN LOG	Comprisonate	Complete date	Previously	
	10001001	retention		
	Carton	n ned	net amount	
***	4 Prom.	w/Appl#7		
		w/Appi#8		
		w/Appl # 9		
Amounts requested o		submitted	lotal waivers	T-1-1-11-11-11-11-11-11-11-11-11-11-11-1
ts requested on our Application No.		waiver due	additional	odditionol
		attached	***************************************	Maiyor
		note	1	
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	Scheduled	Previously		net amount		1		Total waivers	additional	attached
Vendor	Value	Compl to date	retention	earned	w/Appl#7	w/Appl#8	w/Appl # 9	submitted	waiver due	attaction
				70 115 50				0.00	78.115.50	78,115.50
Boerger LLC	88,795.00	86,795.00	8,679.50	70,110.00				000	0.00	
Cady Aquastore	455,000.00	0.00	0.00	0.00				2000	45 450 00	13 150 00
Concord Excavating	171,000.00	66,430.00	6,643.00	59,787.00	3,150.00			47,637.00	12, 130.00	12,130.00
Concentric Integration	273,600.00	22,741.25	2,274.13	20,467.13	w.			15,438.37	5,028.76	5,028.75
Drydon Equipment Inc	65,500.00	64,500.00	6,450.00	58,050.00				0.00	58,050.00	50,050.00
Ellitott Electric Inc	301,400.00	16,750.00	1,675.00	15,075.00				9,675.00	5,400.00	3,400.00
Energenecs	61,300.00	0.00	0.00	0.00				0.00	0.00	
Evoqua Water Technologies	62,000.00	55,800.00	5,580.00	50,220.00	O			0.00	50,220.00	58,800.00
Glander Paving Co	50,000.00	0.00	0.00	0.00	0			0.00	0.00	
Colden Bailing	9,750.00	9,750.00	975.00	8,775.00	0			8,775.00	0.00	
Harris Debar	52.387.45	39,042.90	3,904.29	35,138.61	1 39,042.90			39,042.90	(3,904.29)	
Al Ita	206.502.54	110,502.54	11,050.25	99,452.29	9 1,352.29			1,352.29	98,100.00	98,100.00
Al, Lid.	378 263 00	0.00	0.00	0.00				0.00	0.00	
Metropolitan Pump Co.	3/0,203.00	16 904 37	1 690 44	15.213.94	4 4.820.00			16,620.00	(1,406.06)	
Mid-State Steel Co, Inc	26,360.00	1 110 00	111 00					999.00	0.00	
Mona Composite	13,460.00	1,110.00	2	2				0.00	28,441.80	25,799.75
Ozinga Bros, Inc/Narvick	51,879.75	31,602.00	3,160.20					0.00	13,500.00	
Peterson & Matz, Inc	30,000.00	15,000.00	1,500.00	13,50				0.00	0.00	
Plas-Tanks Industries Inc.	45,067.00	0.00	0.00					7 707 70	0.00	
Pleasant Mount Welding, Inc	11,930.00	8,653.00	865.30	7,787.70	0 4,844.70			1,787.70	0.00	27.000
G A Rich & Sons Inc.	966,800.00	309,899.00	30,989.90	278,909.10	0 21,527.10			263,679.30	15,22,80	15,22,00
DD Codings	42 860 00	0.00	0.00	0.00	0			0.00	0.00	
RN/ Cate Company	93.090.00	69,030.00	6,903.00	62,127.00	0			0.00	62,127.00	62,127.00
XVV Gate Company	148,000.00	130,507.20	13,050.72	117,456.48	œ.			0.00	117,456.48	117,456.48
National Comments	811 27	684.95	68.50	616.46	Ò			0.00	616.46	684.95

PARTIAL WAIVER OF MECHANICS LIEN AND PAYMENT BOND CLAIM 3173553 State of Minnesota County of Carver TO ALL WHOM IT MAY CONCERN: has been employed by Williams WHEREAS, the undersigned, Boerger LLC Brothers Construction Inc to furnish labor and/or materials including all extra work (including both oral or written change orders), according to plans and specifications, as may have been amended orally or in writing, for the premises and project known as: Crst Hill Est WRF Phs Remvl Upg and State of Illinois (the "Project") of Located at Crest Hill, IL , County of Will is the owner. which City of Crest Hill NOW THEREFORE, THE UNDERSIGNED, who represents that he/she is authorized to give and execute this Partial Waiver of Mechanics Lien and Payment Bond Claim for and in consideration of *78* thousand *115* dollars and 50 cents \$78,115.50 and other good and valuable considerations, the receipt whereof is hereby acknowledged, does hereby waive and release: (a) any and all lien or claim or right of lien under the Statutes of the State of Illinois relating to Liens Against Public Funds on the monies, bonds or warrants due or about to become due from the owner on account of labor or services, material, fixtures, apparatus, equipment or machinery heretofore furnished by the undersigned for the above described premises; and (b) any and all claims or rights under any payment bond furnished by Williams Brothers Construction Inc. covering said project or under the Illinois Public Construction Bond Act, as now or hereafter amended, to the extent said Act is applicable. This Release shall apply only to the extent of consideration paid as recited above and not for any other dollar amount. Given under our hand and seal this 15th day of March Project Manager State of Minnesota County of Carver

DANIEL P BUVARP

Minnesota ly Commission Expires Jan 31, 2025

Subscribed and sworn to before me this 15th Day of March, 2023

Notary Jublic

73 TAVA	CENT BOND CLAIM	3165553
ARTIAL WAIVER OF MECHANICS LIEN AND PAYM	ENI BOND CELLS	
cate of)		
ounty of Will		
O ALL WHOM IT MAY CONCERN: WHEREAS, the undersigned, Concording the Construction Inc to furnish lab on oth oral or written change orders), accommended orally or in writing, for the process of the control of the process of the control of the cont	and specifica	ations, as may have been
NOW THEREFORE, THE UNDERSIGNED execute this Partial Waiver of Mechanic. Ten thousand eight hundred dollars a and other good and valuable consideratic does hereby waive and release: (a) any and all lien or claim state of Illinois relating to Liens Again warrants due or about to become due from the material, fixtures, apparatus, equipment undersigned for the above described presented for the above described presented for the property of the p	who represents that he/she is Lien and Payment Bond Claim and no cents \$10,800.00 ons, the receipt whereof is heart or right of lien under the Stainst Public Funds on the monion the owner on account of laboration of the monion of the emises; and the sunder any payment bond further said project or under the reafter amended, to the extent of consideration.	nereby acknowledged, tatutes of the ies, bonds or bor or services, rnished by the rnished by the Illinois extent said
GIVEN UNA	Concord Excavating By:	lus
State of	s July 31st 2022	
	OEEIGIAI SEAI	~~~

OFFICIAL SEAL LAUREEN URASKI NOTARY PUBLIC, STATE OF ILLINOIS WILL COUNTY MY COMMISSION EXPIRES 02/21/2024

PARTIAL WAIVER OF MECHANICS LIEN AND PAYMENT BOND CLAIM	3165553
State of)	
County of Will)ss	
TO ALL WHOM IT MAY CONCERN:	
WHEREAS, the undersigned, Concord Excavating Enterprise Brothers Construction Inc to furnish labor and/or materials i both oral or written change orders), according to plans and s amended orally or in writing, for the premises and project kn Crst Hill Est WRF Phs	ncluding all extra work (including pecifications, as may have been own as:
Located at Crest Hill, IL , County of Will and S which City of Crest Hill is the owner.	tate of Illinois (the "Project") of
and other good and valuable considerations, the receipt where does hereby waive and release:	d Claim for and in consideration of 350.00 of is hereby acknowledged,
(a) any and all lien or claim or right of lien under	he monies, bonds or
warrants due or about to become due from the owner on account material, fixtures, apparatus, equipment or machinery heretof undersigned for the above described premises; and (b) any and all claims or rights under any payment by	ond furnished by
Williams Brothers Construction Inc. covering said project or Public Construction Bond Act, as now or hereafter amended, to	the extent said
Act is applicable. This Release shall apply only to the extent of consiabove and not for any other dollar amount.	deration paid as recited
Given under our hand and seal this $30th$ day of $Junt$	1ary , 20 <u>23</u> .
Concord Exe	vating Enterprises
Ву:	4 Mens
Title: Pre	sident
State ofCounty of	
Subscribed and sworn to before me this January 30,202	25
Notary Public	

 OFFICIAL SEAL
LAUREEN-URASKI
NOTARY PUBLIC, STATE OF ILLINOIS
WILL COUNTY
MY COMMISSION EXPIRES 02/21/2024

PARTIAL WAIVER OF MECHANICS LIEN AND PAIMENT BOND CLAIM 3192555
State of
County of McHenry)
TO ALL WHOM IT MAY CONCERN:
WHEREAS, the undersigned, Concentric Integration has been employed by Williams Brothers Construction Inc to furnish labor and/or materials including all extra work (including both oral or written change orders), according to plans and specifications, as may have been amended orally or in writing, for the premises and project known as: Crst Hill Est WRF Phs Remvl Upg
Located at Crest Hill, IL , County of Will and State of Illinois (the "Project") of which City of Crest Hill is the owner.
NOW THEREFORE, THE UNDERSIGNED, who represents that he/she is authorized to give and execute this Partial Waiver of Mechanics Lien and Payment Bond Claim for and in consideration of Five thousand twenty-eight dollars and 75 cents \$5,028.75 and other good and valuable considerations, the receipt whereof is hereby acknowledged, does hereby waive and release: (a) any and all lien or claim or right of lien under the Statutes of the State of Illinois relating to Liens Against Public Funds on the monies, bonds or warrants due or about to become due from the owner on account of labor or services, material, fixtures, apparatus, equipment or machinery heretofore furnished by the undersigned for the above described premises; and (b) any and all claims or rights under any payment bond furnished by Williams Brothers Construction Inc. covering said project or under the Illinois Public Construction Bond Act, as now or hereafter amended, to the extent said Act is applicable. This Release shall apply only to the extent of consideration paid as recited above and not for any other dollar amount. Given under our hand and seal this day of February, 2023.
Concentric Integration
By:
Title: Treasurer
State of McHenny County of McHenny
Subscribed and sworn to before me this 2 day of February 2023
Notary Public
OFFICIAL SEAL

OFFICIAL SEAL
JESSICA A KUIPER
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:09/02/24

PARTIAL WAIVER OF MECHANICS LIEN AND PAYMENT BOND CLAIM	3177553
State of FLORIDA) County of HILLSBOROUGH)	F
County of HILLSBOROUGH)	
TO ALL WHOM IT MAY CONCERN:	
WHEREAS, the undersigned, Drydon Equipment Inc. Brothers Construction Inc to furnish labor and/or materials includi both oral or written change orders), according to plans and specifi amended orally or in writing, for the premises and project known as Crst Hill Est WRF Phs Remvl	cations, as may have been
Located at Crest Hill, IL , County of Will and State o which City of Crest Hill is the owner.	f Illinois (the "Project") of
NOW THEREFORE, THE UNDERSIGNED, who represents that he/she execute this Partial Waiver of Mechanics Lien and Payment Bond Clair Fifty-eight thousand fifty dollars and no cents \$58,050.00 and other good and valuable considerations, the receipt whereof is does hereby waive and release: (a) any and all lien or claim or right of lien under the State of Illinois relating to Liens Against Public Funds on the more warrants due or about to become due from the owner on account of lamaterial, fixtures, apparatus, equipment or machinery heretofore fundersigned for the above described premises; and (b) any and all claims or rights under any payment bond fulliams Brothers Construction Inc. covering said project or under Public Construction Bond Act, as now or hereafter amended, to the exact is applicable. This Release shall apply only to the extent of consideration above and not for any other dollar amount. Given under our hand and seal this	Im for and in consideration of hereby acknowledged, Statutes of the nies, bonds or abor or services, arnished by the urnished by the Illinois extent said ion paid as recited
Drydon Equipment I	Inc.
By: Menclelle	ettled
Title: CONTRO	LLER
State of Florida County of Hallsborough	
Subscribed and sworn to before me this 14th day of March Notary Public	72023

LINDA A. PROVENCHER

Notary Public - State of Florida

Commission # GG 324851

My Comm. Expires May 17, 2023

Bonded through National Notary Assn.

WAIVER OF LIEN TO DATE

STATE OF ILLINOIS	ss		Gty # _		- A
COUNTY OF GRUNDY	J		Escrow#		
TO WHOM IT MAY CONCERN: WHEREAS the undersigned has be	en employed by WII	LIAMS BROTHERS			
to furnish		ECTRIC			
for the premises known as	The second secon	EST HILL WRF			
of which		LAGE OF CREST HILL		j.	s the owner.
THE undersigned, for and in conside	eration of Five Thousand	d, Four Hundred Dollars & no/100			
(\$ 5,400.00) Dollars do(es) hereby waive and release ar relating to mechanics' liens, with re the material, fixtures, apparatus or undersigned for the above-describe	y and all lien or claim of, on spect to and on said about machinery furnished, and all labor services, material	ve-described premises, and the on the moneys, funds or other , fixtures, apparatus or machin	tes of the State o e improvements t considerations di	f ILLINOIS, hereon, and on ue or to become	
DATE March 27, 2023	COMPANY NAME	ELLIOTT ELECTRIC INC			
	ADDRESS	PO BOX 245 COAL CITY, IL	60416		
SIGNATURE AND TITLE * Extras include but are not limited	Owthey Sc to change orders, both ora		ce mo	magn	
STATE OF ILLINOIS COUNTY OF GRUNDY	ss CONTRACT	ror's Affidavit			
	J				
TO WHOM IT MAY CONCERN: The undersigned COU	JRTNEY SCHULTZ			being duly sy	vorn, deposes
	ICE MANAGER				
	IOTT ELECTRIC INC				_ who is the
	CTRIC			work	on the building
located at owned by VILI	AGE OF CREST HILL				
That the total amount of the contract \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	this payment. Indigenuine and delivered to the second delivered to the second delivered to the second delivered to each, and that the second delivered to each, and the second delivered to each, and the second delivered to each, and the second delivered to each de	d addresses of all parties who cific portions of said work or fo	— s no claim either have furnished m or material enterir	aterial or labor, or ig into the constru	o defeat the both, for said ction thereof
NAMES AND ADDRESSES	WHAT FOR	CONTRACT PRICE INCLUDING EXTRAS*	AMOUNT PAID	THIS PAYMENT	BALANCE
ELLIOTT ELECTRIC INC	MATERIAL	15,000.00	0.00	0.00	15,000.0
ELLIOTT ELECTRIC INC	LABOR	2,500.00	450.00	0.00	2,050.0
ELLIOTT ELECTRIC INC	LABOR	22,000.00	0.00	0.00	22,000.0
ELLIOTT ELECTRIC INC	LABOR	500.00	0.00	0.00	500.0
ELLIOTT ELECTRIC INC	MATERIAL	8,000.00	0.00	0.00	8,000.0
ELLIOTT ELECTRIC INC	LABOR	9,000.00	0.00	0.00	9,000.0
ELLIOTT ELECTRIC INC	LABOR	1,000.00	0.00	0.00	1,000.0
Total Labor And Material Including Ext	ras* To Complete	301,400.00	9,675.00	5,400.00	286,325.0
That there are no other contracts for sa any kind done upon or in connection w	ith said work other than abov	e stated.	e due to any person \mathcal{S}_{a}	o for material, labor o	r other work of
DATE March 27, 2023		gnature:	1 000	my	
Subscribed and sworn before me to	EYNDSAY J MILE	day of	March		2023
*EXTRAS INCLUDE BUT ARE NOT LIMITE ORDERS, BOTH ORAL AND WRITTEN, TO	THE GONTRYPUBLIC - State of My Commission Expires M	ar 16, 2025	y puis	N _i	otary
TORGO SOFTWARE www.TorgoSoftware	On C1996-2019 AL PIGHTS	DECERVED.			Page 1 of 2

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- 4	- 1	- /	- 1	5	h	

PARTIAL WAIVER OF MECHANICS LIEN AND PAIMENT BOND CO	DATE:
<pre>3tate of));ss</pre>	
County of)	
O ALL WHOM IT MAY CONCERN:	
Brothers Construction Inc to furnish labor and/or mayoth oral or written change orders), according to particularly or in writing, for the premises and particularly or in writing, for the premise and particularly or in writing, for the premise and particularly or in writing, for the premise and particularly or in writing and part	lans and specifications, as may have been
Socated at Crest Hill, IL , County of Will which City of Crest Hill is the owner.	and State of Illinois (the "Project") of
NOW THEREFORE, THE UNDERSIGNED, who represent execute this Partial Waiver of Mechanics Lien and Partial theorem of the Mechanics Lien and Partial of the good and valuable considerations, the receives hereby waive and release: (a) any and all lien or claim or right of the state of Illinois relating to Liens Against Public warrants due or about to become due from the owner material, fixtures, apparatus, equipment or machine indersigned for the above described premises; and (b) any and all claims or rights under any filliams Brothers Construction Inc. covering said proble. This Release shall apply only to the extension and not for any other dollar amount. Siven under our hand and seal this 01 day	sa, 100.00 ceipt whereof is hereby acknowledged, lien under the Statutes of the Funds on the monies, bonds or on account of labor or services, ery heretofore furnished by the y payment bond furnished by project or under the Illinois amended, to the extent said at of consideration paid as recited
Given under our hand and seal this UI day	01, 20 <u>20,</u>
	oqua Water Technologies
Ву	y: Denise Szalewski
Ti	itle: Project Manager
State of	
Subscribed and sworn to before me this	

Notary Public

ARTIAL WAIVER OF MECHANICS LIEN AND PAYMENT BOND	CLAIM	3171553	3 4
tate of)			
ounty of)			¥
O ALL WHOM IT MAY CONCERN:			
WHEREAS, the undersigned, Evoqua Water Torothers Construction Inc to furnish labor and/or oth oral or written change orders), according to mended orally or in writing, for the premises are crst Hill	r materials including all plans and specification	T EXCLA MOLK	(The functing
ocated at Crest Hill, IL , County of Will which City of Crest Hill is the own	and State of Ill	inois (the "F	?roject") of
NOW THEREFORE, THE UNDERSIGNED, who represents this Partial Waiver of Mechanics Lien and *55* thousand *800* dollars and no cented of the good and valuable considerations, the does hereby waive and release: (a) any and all lien or claim or right state of Illinois relating to Liens Against Publicarrants due or about to become due from the own material, fixtures, apparatus, equipment or mach indersigned for the above described premises; and (b) any and all claims or rights under williams Brothers Construction Inc. covering sail Public Construction Bond Act, as now or hereafted Act is applicable. This Release shall apply only to the example of the cover of the	ts \$55,800.00 receipt whereof is herel of lien under the Status ic Funds on the monies, er on account of labor of inery heretofore furnish d any payment bond furnish d project or under the r amended, to the exten tent of consideration p lay of February Evoqua Water Technolog	tes of the bonds or or services, hed by the hed by Illinois t said aid as recite	ed,
	By: Denise Szalewski	,	

State of ______

Notary Public

Subscribed and sworn to before me this _____

Title: Project Manager

PARTIAL WAIVER OF MECHANICS LIEN AND PAYMENT BOND CLAIM

State of Alinois
County of Cook)
TO ALL WHOM IT MAY CONCERN:
WHEREAS, the undersigned, LAI, Ltd. Brothers Construction Inc to furnish labor and/or materials including all extra work (including both oral or written change orders), according to plans and specifications, as may have been amended orally or in writing, for the premises and project known as: Crst Hill Est WRF Phs Remvl Upg
Located at Crest Hill, IL , County of Will and State of Illinois (the "Project") of which City of Crest Hill is the owner.
NOW THEREFORE, THE UNDERSIGNED, who represents that he/she is authorized to give and execute this Partial Waiver of Mechanics Lien and Payment Bond Claim for and in consideration of *98* thousand *100* dollars and no cents \$98,100.00 and other good and valuable considerations, the receipt whereof is hereby acknowledged, does hereby waive and release: (a) any and all lien or claim or right of lien under the Statutes of the State of Illinois relating to Liens Against Public Funds on the monies, bonds or warrants due or about to become due from the owner on account of labor or services, material, fixtures, apparatus, equipment or machinery heretofore furnished by the undersigned for the above described premises; and (b) any and all claims or rights under any payment bond furnished by Williams Brothers Construction Inc. covering said project or under the Illinois Public Construction Bond Act, as now or hereafter amended, to the extent said Act is applicable. This Release shall apply only to the extent of consideration paid as recited above and not for any other dollar amount.
Given under our hand and seal this 134 day of March, 20 33 .
Title: Vice President
State ofCounty of
Subscribed and sworn to before me this Notacy Public MARY S HEALY Official Seal Notary Public - State of Illinois My Commission Expires Jul 28, 2024

PARTIAL WAIVER OF MECHANICS LIEN AND PAYMENT BOND CLAIM
State of Illinois
State of Minois Sounty of Grundy)
O ALL WHOM IT MAY CONCERN:
WHEREAS, the undersigned, Narvick Brothers Red-Mix has been employed by Williams Brothers Construction Inc to furnish labor and/or materials including all extra work (including both oral or written change orders), according to plans and specifications, as may have been smended orally or in writing, for the premises and project known as: Crst Hill Est WRF Phs Remvl Upg
Located at Crest Hill, IL , County of Will and State of Illinois (the "Project") of which City of Crest Hill is the owner.
NOW THEREFORE, THE UNDERSIGNED, who represents that he/she is authorized to give and execute this Partial Waiver of Mechanics Lien and Payment Bond Claim for and in consideration of *21* thousand *267* dollars and no cents \$21,267.00 and other good and valuable considerations, the receipt whereof is hereby acknowledged, does hereby waive and release: (a) any and all lien or claim or right of lien under the Statutes of the State of Illinois relating to Liens Against Public Funds on the monies, bonds or warrants due or about to become due from the owner on account of labor or services, material, fixtures, apparatus, equipment or machinery heretofore furnished by the undersigned for the above described premises; and (b) any and all claims or rights under any payment bond furnished by williams Brothers Construction Inc. covering said project or under the Illinois Public Construction Bond Act, as now or hereafter amended, to the extent said Act is applicable. This Release shall apply only to the extent of consideration paid as recited above and not for any other dollar amount. Given under our hand and seal this 315th day of March 2023, 20
Narvick Brothers Red-Mix
By: Golw Shee
Title: 6M
Subscribed and sworn to before me this 31 st day of March, 2023.
Subscribed and sworn to before me this St. Gray C. T. W. C.
Notary Public

OFFICIAL SEAL AMBER M MISKELL Notary Public, State of Illinois My Commission Expires 3-22-27

PARTIAL WAIVER OF MECHANICS LIEN AND PAYMENT BOND CLAIM	3188553
State of ILLINOIS)ss	
County of WILL	
TO ALL WHOM IT MAY CONCERN:	
WHEREAS, the undersigned, Ozinga Bros., Inc. Brothers Construction Inc to furnish labor and/or materials income both oral or written change orders), according to plans and speamended orally or in writing, for the premises and project known amended orally or in writing, for the premises and project known crst Hill Est WRF Phs Recommendations.	ecifications, as may have been wn as:
Located at Crest Hill, IL , County of Will and Stawhich City of Crest Hill is the owner.	ate of Illinois (the "Project") of
and other good and valuable considerations, the receipt whereo does hereby waive and release: (a) any and all lien or claim or right of lien under State of Illinois relating to Liens Against Public Funds on the warrants due or about to become due from the owner on account material, fixtures, apparatus, equipment or machinery heretofor undersigned for the above described premises; and (b) any and all claims or rights under any payment be williams Brothers Construction Inc. covering said project or undersigned for the above and Act, as now or hereafter amended, to Act is applicable. This Release shall apply only to the extent of considerabove and not for any other dollar amount.	32.75 of is hereby acknowledged, the Statutes of the ne monies, bonds or of labor or services, ore furnished by the ond furnished by under the Illinois the extent said deration paid as recited
Ozinga Bros., By: Title: Credit	den Ry
Subscribed and sworn to before me this April 3, 2023 Outcless A. Belo	PATRICIA A. ZEEB OFFICIAL SEAL Notary Public, State of Illinois My Commission Expires September 21, 2025

PARTIAL WAIVER OF MECHANICS LIEN AND PAYMENT BOND CLAIM 3100000
State of))ss
County of Tazewell)
TO ALL WHOM IT MAY CONCERN:
WHEREAS, the undersigned, G.A. Rich & Sons Inc. has been employed by Williams Brothers Construction Inc to furnish labor and/or materials including all extra work (including both oral or written change orders), according to plans and specifications, as may have been amended orally or in writing, for the premises and project known as: Crst Hill Est WRF Phs Remvl Upg
Located at Crest Hill, IL , County of Will and State of Illinois (the "Project") of which City of Crest Hill is the owner.
NOW THEREFORE, THE UNDERSIGNED, who represents that he/she is authorized to give and execute this Partial Waiver of Mechanics Lien and Payment Bond Claim for and in consideration of *13* thousand *879* dollars and 80 cents \$13,879.80 and other good and valuable considerations, the receipt whereof is hereby acknowledged, does hereby waive and release: (a) any and all lien or claim or right of lien under the Statutes of the State of Illinois relating to Liens Against Public Funds on the monies, bonds or warrants due or about to become due from the owner on account of labor or services, material, fixtures, apparatus, equipment or machinery heretofore furnished by the undersigned for the above described premises; and (b) any and all claims or rights under any payment bond furnished by Williams Brothers Construction Inc. covering said project or under the Illinois Public Construction Bond Act, as now or hereafter amended, to the extent said Act is applicable. This Release shall apply only to the extent of consideration paid as recited above and not for any other dollar amount.
Given under our hand and seal this 20th day of March, 2023.
G.A. Rich & Sons Inc. By:
State of Illinois County of Tazewell
Subscribed and sworn to before me this 3/20/23 Notary Public OFFICIAL SEAL JUDY C STECHMAN NOTARY PUBLIC, STATE OF ILLINOIS TAZEWELL COUNTY MY COMMISSION EXPIRES 02/10/2027

G.A. Rich & Sons Inc.

By: Somme & Sea

Title: President

State of Illinois
County of Tazewell

Subscribed and sworn to before me this 3/20/23

and sworm to before me this

Notary Public

OFFICIAL SEAL
JUDY C STECHMAN
NOTARY PUBLIC, STATE OF ILLINOIS
TAZEWELL COUNTY

MY COMMISSION EXPIRES 02/10/2027

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20 0 2023

PARTIAL WAIVER OF MECHANICS LIEN AND PAYMENT BOND CLAIM	3178553	а — — — — — — — — — — — — — — — — — — —	Ė
State of NEW YORK) County of RENSSELACE)			
County of <u>REW35FLAER</u>)			
TO ALL WHOM IT MAY CONCERN:			
WHEREAS, the undersigned, RW Gate Company Brothers Construction Inc to furnish labor and/or materials including both oral or written change orders), according to plans and specific amended orally or in writing, for the premises and project known as Crst Hill Est WRF Phs Remvl U	cations, as may	k (includ	ding
Located at Crest Hill, IL , County of Will and State of which City of Crest Hill is the owner.	f Illinois (the	"Project'	") of
NOW THEREFORE, THE UNDERSIGNED, who represents that he/she execute this Partial Waiver of Mechanics Lien and Payment Bond Clair Eight thousand one dollars and no cents \$8,001.00 and other good and valuable considerations, the receipt whereof is light does hereby waive and release: (a) any and all lien or claim or right of lien under the State of Illinois relating to Liens Against Public Funds on the monewarrants due or about to become due from the owner on account of law material, fixtures, apparatus, equipment or machinery heretofore furtundersigned for the above described premises; and (b) any and all claims or rights under any payment bond fur Williams Brothers Construction Inc. covering said project or under the Public Construction Bond Act, as now or hereafter amended, to the exact is applicable. This Release shall apply only to the extent of consideration above and not for any other dollar amount. Given under our hand and seal this day of	m for and in con hereby acknowled tatutes of the ies, bonds or bor or services, rnished by the rnished by the Illinois xtent said	sideration ged,	
RW Gate Company By: Karen Ro Title: France A			
State of New York County of New York			
Subscribed and sworn to before me this 9^{99} At of Marcis 2023			
Notary Public			

MATTHEW FRANCIS LENNON NOTARY PUBLIC-STATE OF NEW YORK No. 01LE6429080 Qualified in Saratoga County My Commission Expires 02-07-2026

PARTIAL WAIVER OF MECHANICS LIEN AND PAYMENT E	BOND CLAIM	I	3178553	,	0
State of NEW YORK)					
State of NEW YORK) State of NEW YORK) State of NEW YORK)					
TO ALL WHOM IT MAY CONCERN:					
WHEREAS, the undersigned, RW Gate Com Brothers Construction Inc to furnish labor and both oral or written change orders), according amended orally or in writing, for the premises Crst Hi	d/or mater g to plans s and proj	ials including al and specification		k (incl	uding
Located at Crest Hill, IL , County of Will which City of Crest Hill is the		and State of Ill	inois (the '	'Projec	t") o
NOW THEREFORE, THE UNDERSIGNED, who rexecute this Partial Waiver of Mechanics Lien *54* thousand *126* dollars and no common and other good and valuable considerations, the does hereby waive and release: (a) any and all lien or claim or right state of Illinois relating to Liens Against Put warrants due or about to become due from the of material, fixtures, apparatus, equipment or material, fixtures, apparatus, eq	and Payme cents he receipt of lien ablic Fund owner on a achinery he and er any pays aid projecter amend extent of	nt Bond Claim for \$54,126.00 whereof is herek under the Statuts on the monies, count of labor deretofore furnishment bond furnish ot or under the I ed, to the extent consideration page 125.00 cm.	e and in consequences of the bonds or or services, and by the sed by clinois said	siderat ged,	
		e Company			
		Karen Rosa			
	Title:	France Assis	start		

State of NGW YORK County of KEWSSELAKE

Subscribed and sworn to before me this 9th Day of MARCH ZDZ3

Notary Public

MATTHEW FRANCIS LENNON NOTARY PUBLIC-STATE OF NEW YORK No. 01LE6429080 Qualified in Saratoga County My Commission Expires 02-07-2026

PARTIAL WAIVER OF MECHANICS LIEN AND PAYMENT BOND CLAIM

State of)
County of New Castle)
TO ALL WHOM IT MAY CONCERN:
WHEREAS, the undersigned, Xylem Water Solutions U.S.A. has been employed by Williams Brothers Construction Inc to furnish labor and/or materials including all extra work (including both oral or written change orders), according to plans and specifications, as may have been amended orally or in writing, for the premises and project known as: Crst Hill Est WRF Phs Remvl Upg
Located at Crest Hill, IL , County of Will and State of Illinois (the "Project") of which City of Crest Hill is the owner.
NOW THEREFORE, THE UNDERSIGNED, who represents that he/she is authorized to give and execute this Partial Waiver of Mechanics Lien and Payment Bond Claim for and in consideration of *117* thousand *456* dollars and 48 cents \$117,456.48 and other good and valuable considerations, the receipt whereof is hereby acknowledged, does hereby waive and release: (a) any and all lien or claim or right of lien under the Statutes of the State of Illinois relating to Liens Against Public Funds on the monies, bonds or warrants due or about to become due from the owner on account of labor or services, material, fixtures, apparatus, equipment or machinery heretofore furnished by the undersigned for the above described premises; and (b) any and all claims or rights under any payment bond furnished by Williams Brothers Construction Inc. covering said project or under the Illinois Public Construction Bond Act, as now or hereafter amended, to the extent said Act is applicable. This Release shall apply only to the extent of consideration paid as recited above and not for any other dollar amount.
Given under our hand and seal this25 day ofFebruary, 20_23
By:
State of <u>Delaware</u> County of <u>New Castle</u>
Subscribed and sworn to before me this

PARTIAL WAIVER OF MECHANICS LIEN AND PAYMENT BOND CLAIM 3180553
State of <u>TL</u>) State of <u>Plona</u>) State of <u>Plona</u>)
TO ALL WHOM IT MAY CONCERN:
WHEREAS, the undersigned, Zendavor Creative Group has been employed by Williams Brothers Construction Inc to furnish labor and/or materials including all extra work (including both oral or written change orders), according to plans and specifications, as may have been amended orally or in writing, for the premises and project known as: Crst Hill Est WRF Phs Remvl Upg
Located at Crest Hill, IL , County of Will and State of Illinois (the "Project") of which City of Crest Hill is the owner.
NOW THEREFORE, THE UNDERSIGNED, who represents that he/she is authorized to give and execute this Partial Waiver of Mechanics Lien and Payment Bond Claim for and in consideration of Six hundred eighty-four dollars and 95 cents \$684.95 and other good and valuable considerations, the receipt whereof is hereby acknowledged, does hereby waive and release: (a) any and all lien or claim or right of lien under the Statutes of the State of Illinois relating to Liens Against Public Funds on the monies, bonds or warrants due or about to become due from the owner on account of labor or services, material, fixtures, apparatus, equipment or machinery heretofore furnished by the undersigned for the above described premises; and (b) any and all claims or rights under any payment bond furnished by Williams Brothers Construction Inc. covering said project or under the Illinois Public Construction Bond Act, as now or hereafter amended, to the extent said Act is applicable. This Release shall apply only to the extent of consideration paid as recited above and not for any other dollar amount.
Given under our hand and seal this 3rd day of April , 20 23 .

State of

County of _____

Notary Public

Subscribed and sworn to before me this _____

Zendavor Creative Group

By: Atru Hookl

Title: President



Case #: 23-CTP-069717

Illinois Department of Labor

160 N. LaSalle St Suite1300 Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

CERTIFIED TRANSO	CRIPT OF PAYROLL FORM
	AY HERIOD
Payroll Date	Project Location
2/23/2023 to 3/1/2023	2250 N BROADWAY ST
Contractor Number Or FEIN	CREST HILL IL 60403
370971367	No Work Report: Yes
Project Number or Name	State Capital Funds
Crest Hill	No
Agency	
Not a State Agency	
And the Contractors	ind/or Subcontractor
Company Name	Contractor Location
Williams Brothers Construction	PO BOX 1366
Contact Name	PEORIA IL 61654
Jackie M Smith	
Primary Email	Secondary Email
cp@wbci.us	cp@wbci.us
Primary Phone	Secondary Phone
3096880416	
Public i	Sody: Inflatination - 23
Public Body Name	Public Body Address
Crest Hill	2250 N BROADWAY ST
Contact Name	CREST HILL IL 60403
Primary Phone	Secondary Phone

reiput — Lza				Emily	ee Deta	lis III	, Wa		AND SHARE			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Name	Last4SSN	Classificati	Address	City	Race	Ethnicity	G	٧	J	F	Α	PhoneNumber
		on										
	G-G	ender	V-Vetera	ın	J-Jou	ırneyman		F-Fo	reman		A-A	oprentice

N H L- Not Hispanic or Latino H L- Hispanic or Latino

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Name	Mon	Tue	Wed	Thr	Fri	Sat	Sun	Straight Hrs	Tot OT Hrs	Dub Tim Hrs	Hourly Wage	OT Wage	Dbl Tim	Gross	Net	No Wor	
				W. W	0800000		*	1115	1110	11113	waye	Rate	Wage			k	

I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project—that during the payroll period commencing between mentioned above, 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 fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

Mallori Upchurch

Mar 30, 2023



Case #: 23-CTP-069745

Illinois Department of Labor

160 N. LaSalle St Suite1300 Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

CERTIFIED TRANSCRIPT OF PAYROLL FORM

	TPLEASERIOD.
Payroll Date	Project Location
3/2/2023 to 3/8/2023	2250 N BROADWAY ST
Contractor Number Or FEIN	CREST HILL IL 60403
370971367	No Work Report: Yes
Project Number or Name	State Capital Funds
Crest Hill	No
Agency	
Not a State Agency	
Contract	Nor and/or Subcontractor
Company Name	Contractor Location

Company Name	Contractor Location
Williams Brothers Construction	PO BOX 1366
Contact Name	PEORIA IL 61654
Jackie M Smith	
Primary Email	Secondary Email
cp@wbci.us	cp@wbci.us
Primary Phone	Secondary Phone
3096880416	

	Public Berg	nformation
Public Body Name	מרונה בה הדול המדונה המדונה היה ביו היה ביו היה מיניה בייניה מדובה היה היה היה היה היה מדונה מדונה מדונה בייני מרונה ההיה היה היה היה היה היה היה היה היה	Public Body Address
Crest Hill		2250 N BROADWAY ST
Contact Name		CREST HILL IL 60403
Primary Phone	######################################	Secondary Phone

Employee Details (1997)												
Name	Last4SSN	Classificati	Address	City	Race	Ethnicity	G	V	J	F	Α	PhoneNumber
		on						Ì		OE CONTRACTOR OF		
G-Gender		V-Vetera	ın	J-Jou	mevman		F-For	eman		A-Ap	prentice	

N H L- Not Hispanic or Latino H L- Hispanic or Latino

		,			A No. The William	
ame Mon Tue	Wed Thr Fri	Sat Sun	Straight Tot OT Hrs Hrs	 OT Dbl Wage Tim Rate Wag		Net No Wor

I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project—that during the payroll period commencing between mentioned above, 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 fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

Mallori Upchurch

Mar 30, 2023



3096880416

Case #: 23-CTP-069731

Illinois Department of Labor

160 N. LaSalle St Suite1300 Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

CERTIFIED TRANSCRIPT OF PAYROLL FORM

	Party Control of the	
Payroll Date		Project Location
3/9/2023 to 3/15/2023		2250 N BROADWAY ST
Contractor Number Or FEIN	V	CREST HILL IL 60403
370971367		No Work Report: Yes
Project Number or Name	000000000000000000000000000000000000000	State Capital Funds
Crest Hill		No
Agency		
Not a State Agency		

Con	tractor and/or Subcontractor
Company Name	Contractor Location
Williams Brothers Construction	PO BOX 1366
Contact Name	PEORIA IL 61654
Jackie M Smith	
Primary Email	Secondary Email
cp@wbci.us	cp@wbci.us
Primary Phone	Secondary Phone

	The state of the second
Public Body Name	Public Body Address
Crest Hill	2250 N BROADWAY ST
Contact Name	CREST HILL IL 60403
Primary Phone	Secondary Phone

	<u>.</u>			Farrigija	efistel	s - 174	į, A	144	sessess.	146.2		
Name	Last4SSN	Classificati	Address	City	Race	Ethnicity	G	٧	J	F	Α	PhoneNumber
		on									***************************************	
G-Gender		V-Veteran		J-Journeyman			F-Foreman			A-Apprentice		

N H L- Not Hispanic or Latino H L- Hispanic or Latino

 d ngg			200		an i		H	-4	North 1	tion?			477-24	
Name	***************************************	Mon	Tue	Wed	Thr	Fri	Sat	Sun		Dub Tim Hrs	OT Wage Rate	Dbl Tim Wage		No Wor k

I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project—that during the payroll period commencing between mentioned above, 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 fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

Mallori Upchurch

Mar 30, 2023



Case #: 23-CTP-069736

Illinois Department of Labor

160 N. LaSalle St Suite1300 Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

CERTIFIED TRANSCRIPT OF PAYROLL FORM

CERTIFIED	TRANSCRIPT OF PAYROLL FORM
	PAY PERIOD PAY NO. 12 MILES
Payroll Date	Project Location
3/16/2023 to 3/22/2023	2250 N BROADWAY ST
Contractor Number Or FEIN	CREST HILL IL 60403
370971367	No Work Report: Yes
Project Number or Name	State Capital Funds
Crest Hill	No
Agency	VICTOR 2007 CONTROL OF THE CONTROL O
Not a State Agency	
	Iontractor and/or Subcontractor
Company Name	Contractor Location
Williams Brothers Construction	PO BOX 1366
Contact Name	PEORIA IL 61654
Jackie M Smith	
Primary Email	Secondary Email
cp@wbci.us	cp@wbci.us
Primary Phone	Secondary Phone
3096880416	
	y Public Body Information " " " " " " " " " " " " " " " " " " "
Public Body Name	Public Body Address
Crest Hill	2250 N BROADWAY ST
Contact Name	CREST HILL IL 60403
Primary Phone	Secondary Phone
	- Coolidaly I Holic

	- 22439				e Betei							
Name	Last4SSN Classificati		Address	City	Race	Ethnicity	G	V	J	F	Α	PhoneNumber
		on										
	G-G	ender	V-Vetera	n	J-Jou	meyman		F-For	eman		A-Ap	prentice

N H L- Not Hispanic or Latino H L- Hispanic or Latino

								Mark (1								ų į
Name	Mon	Tue	Wed	Thr	Fri	Sat	Sun	Straight Hrs	Tot OT Hrs	Dub Tim Hrs	Hourly Wage	OT Wage Rate	Dbl Tim Wage	Gross	Net	No Wor k

I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project—that during the payroll period commencing between mentioned above, 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 fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

Mallori Upchurch

Contractor ELLIOTT ELECTRIC, INC. 1600 SOUTH BROADWAY P. O. BOX 245 COAL CITY, IL 60416

Customer WILLIAMS BROTHERS CONST INC PO BOX 1366 PEORIA, IL 61654

Job Number: 22-40 Week Ending: 12/4/2022

Name / Address / Phone	Soc 5 Class Mar	ec No. Exemp.	11/28 Mon	11/29 Tue	Ho 11/30 Wed	urs Work 12/01 Thu	ed This 3 12/02 Fri	ob 12/03 Sat	12/04 Sun	Tot	Pay Rate	Gross Pay This Job All Jobs	Dedu Fed. Fica Med State	ctions — Local Other Total	Check #
	gular rtime	Hours 0.000 0.000 0.000	A CONTRACTOR OF THE CONTRACTOR	Pay 0.00 0.00 0.00		# = - = = = ±			******		3 5556	27 (1.0 to 30 to 20 (20 (20 (20 (20 (20 (20 (20			net ray

I, Courtney Schultz, Office Manager do hereby state:

1] That I pay or supervise the payment of the persons employed by ELLIOTT ELECTRIC, INC. on the (JOB) that 1] That I pay or supervise the payment of the persons employed by ELLIOTT ELECTRIC, INC. on the (JOB) that during the payroll period commencing on 11/28/2022 and ending 12/4/2022, 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 ELLIOTT ELECTRIC, INC.from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Ad, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described

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 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

XX—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) EXCEPTION (CRAFT) EXPLANATION

REMARKS Name and title

Courtney Schultz, Office Manager

The Wilful Felsification Of Any Of Title 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.

Contractor ELLIOTT ELECTRIC, INC. 1600 SOUTH BROADWAY P. O. BOX 245 COAL CITY, IL 60416

Customer WILLIAMS BROTHERS CONST INC PO BOX 1366

PEORIA, IL 61654

Job Number: 22-40 Week Ending: 12/11/2022

Name / Address / Phone	Soc Sec No Class Mar Boo	12/05	12/06	LEJUT	us Woi 12/08	ked This Jo 12/09	b 12/10	12/11	Processor	Pay	Gress Pay This Job	Fed. Fica	ictions — Local Other	Check #
*			Tue	Wed	Thu	Fri	Sat	Sun	Tot	Rate	All Jobs	Med State	Total	Net Pay
DEVON C ELLIOTT 715 HERTTAGE DRIVE	***-**-01. I.B.E.W. /	O R: 0,000 176 AREA GEN	0.000 FRAL FORE	8.000	0.00	000.a	0.000	0.000	8.000	60,500	484.00	=====: 408.65	0.00	==== V321.1
DIAMOND, IL 50416 (815) 593-1935	Single WHITE Ma	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	+44.943FR 0.000 +0.000FR	2873.75 45hrs	178.17 41.67 142.25	239.56 1010.30	1863.45
	Fringe Rate Amount	APPR 176 1.230 9.84	DECP 176 6.900 55.20) 16	176 .940 5.52	LMCC 176 0.150 1.20	12.	176 NE 650 .20	BF 176 1.815 14.52	NECA 176 0.303 2.42		SUB 1	76 70 44	Total .943 9.54
	Deduction Amount	IL ST DI 69.23	DUES 176 100.58	10,000	176 2.25	SAV 176 67.50		otal .56				· •		<i>3.3</i> 1
	Regular 8.	900 000 000	<u>Pay</u> 484.00 0.00 484.00											

I, Courtney Schultz, Office Manager do hereby state: I, Courtney Schultz, Office Manager do hereby state:

1] That I pay or supervise the payment of the persons employed by ELLIOTT ELECTRIC, INC. on the (JOB) that during the payroll period commencing on 12/5/2022 and ending 12/11/2022, 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 ELLIOTT ELECTRIC, INC.from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described

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.

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.

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

XX-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

payroli, payments or range 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 then 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) EXCEPTION (CRAFT) EXPLANATION REMARKS

COSTAND. Courtney Schultz, Office Manager 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.

Contractor ELLIOTT ELECTRIC, INC. 1600 SOUTH BROADWAY P. O. BOX 245 COAL CITY, IL 60416

Customer WILLIAMS BROTHERS CONST INC PO BOX 1366

PO BOX 1366 PEORIA, IL 61654 Job Number: 22-40 Week Ending: 12/18/2022

REMARKS

	Sec.	Sec No.						. 85					- Dedu Fed.	ctions	
Name / Address / Phone	Class Mar	Faamo	12/12 Mon	12/13	12/14	12/15	ced This) 12/16 Fri	12/17	12/18 Sun	Tot	Pay Rate	Gross Pay This Job All Jobs	Fica Med State	Other	Check #
*	Regular Overtime	Hours 9,000 0,000 0,000		Pay 0.00 0.00 0.00						*****	*****		*****		inst rey
I, Courtney Schuli 1] That I pay of during the payroll have been paid it to or on behalf of deductions have it permissible in any payrollation of apprential State, are registed. (a) WHERE FARGERAM XX—In additionally payroll, payments the benefit of such the benefit of such as listed in the conditions of the conditions of the payroll of the conditions of the payroll of the conditions of the	period co period	se the pipe of the	ng on es es ea es ea es ea es ea es ea es	t of till 12/11 med, 1	nte per 2/2022 that no that no that no that no that no midrect is, Par 3 Stat miract nechar ted int perfon ove pe m regi States entices O APP ates po tin Section CAS power	requilics control of the first the f	red to contribute that the	be suad the act; the state of La state of	bmitterein an at the UNDS er or more will	will be armed sarned Issue Stat. ed for re not e class renticor if nod Stat. OR mecha I be m	the about the ship acoustification such responses to the ship acoustification testing testing the ship acoustification testing the s	ve period an the ap s set fort dency receptartment of	ectly on some control of the control of Laborator of Labo	aid pro- r indire t no han abor un abor un ad des prrect a a wage sin for f by th cy exis . eferen grams	ider cribed and rates each is in

Name and title
Courtney Schultz, Office Manager
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.

Contractor ELLIOTT ELECTRIC, INC. 1600 SOUTH BROADWAY P. O. BOX 245 COAL CITY, IL 60416

WILLIAMS BROTHERS CONST INC PO BOX 1366 **PEORIA, IL 61654**

Job Number: 22-40 Week Ending: 12/25/2022

	Soc 5	iec No.				195	ب يرشونون						– Dedu Fed.	ctions Local	
Name / Address / Phone	Class Mar	Exemp.	12/19 Man	12/20 Tue	12/21 Wed	urs Work 12/22 Thu	ea ins j 12/23 Fri	12/24	12/25		Pay	Gross Pay This Job	Fica Med	Other	Check #
						11)U ========	rn ————	Sat	Sun	Tot	Rate	Alf Jobs	State	Total	Net Pav
Reg Over		Hours 0.000 0.000 0.000		Pay 0.00 0.00 0.00	•					****	=== <u>=</u>		==#**	and an anilytic	

I, Courtney Schultz, Office Manager do hereby state:

1] That I pay or supervise the payment of the persons employed by ELLIOTT ELECTRIC, INC. on the (JOB) that during the payroll period commencing on 12/19/2022 and ending 12/25/2022, 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 ELLIOTT ELECTRIC, INC. from the full weekly wages earned by any person and that no described have been made either directly or indirectly from the full wages earned by any person, other than deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described

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

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.

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

XX—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) EXCEPTION (CRAFT)

EXPLANATION REMARKS Name and title

Courtney Schultz, Office Manager
The Wilful Falsification Of Any Of The Above Statements The Wilful Faisification Of Any Of The Above Statements Nay 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.

Contractor ELLIOTT ELECTRIC, INC. 1600 SOUTH BROADWAY P. O. BOX 245 COAL CITY, IL 60416

Customer WILLIAMS BROTHERS CONST INC PO POX 1366

PO BOX 1366 PEORIA, IL 61654 Job Number: 22-40 Week Ending: 1/1/2023

REMARKS

		Soc S	ec No.			مضد	60%	a						Deduc	tions — Local	
Name / Address /		Class Mar	Exemo.	12/26 Mon	12/27 Tue	12/28 Wed	12/29 Thu	FH	12/31 Sat	01/01 Sun	Tot	Pay Rate	Gross Pay This Job All Jobs	Fica Med State	Other	Check a
	Reç Over	ular ime	Hours 0.000 0.000 0.000		Pary 0.00 0.00 0.00										1777	
1] That I during the p have been p to or on beh deductions he permissible the Copeland below; 2] That ar complete; the contained in laborer or mi	alf of said have been deduction d Act, as a my payroli at the wa	ELLI made s as d imend s othe ge rat	ether efined i led (48 www.se u	des ea ECTRI direct n Reg Stat. Stat.	med, C, INC ly or i ulation 948, 6 his co	that nifrom ndirects, Pai 3 Statenstates the national market nechair	o rebathe fi the fi thy fro t 3 (2 : 108, requi	ites ha ull wee m the 9 CFR 72 St	ive be kly w full w Subtl at. 96	en or ages of ages of the A), 57; 76	will be armed lasue Stat.	made by any by any d by the 357; 40	person of person of person of person of person, of person, of Secreta U.S.C. 2	rectly or and the other t ry of La 76c), ar	proje indire t no han bor u nd des	ct scdy nder cribec
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Name and title
Courtney Schultz, Office Manager
The Willful Falsincation 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.

Contractor ELLIOTT ELECTRIC, INC. 1600 SOUTH BROADWAY P. O. BOX 245 COAL CITY, IL 60416

Customer WILLIAMS BROTHERS CONST INC PO BOX 1366

PEORIA, IL 61654

Job Number: 22-40 Week Ending: 1/8/2023

	Soc S	iec No.		***********		u om i Kasik							– Dedu Fed.	ctions Local	
Name / Address / Phone	Class Mar	Exemp.	01/02 Mon	01/03 Tue	01/04 Wed	01/05 Thu	01/06 Pri	01/07 Sat	01/08 Sun		Pary	Gross Pay This Job	Fica Med	Other	Check #
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I, Courtney Schultz, Office Manager do hereby state:

1] That I pay or supervise the payment of the persons employed by ELLIOTT ELECTRIC, INC. on the (JOB) that during the payroll period commencing on 1/2/2023 and ending 1/8/2023, 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 ELLIOTT ELECTRIC, INC from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), Issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 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 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.

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

XX—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) EXCEPTION (CRAFT) EXPLANATION

REMARKS signature 04 Courtney Schultz, Office Manager
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.

ELLIOTT ELECTRIC, INC. 1600 SOUTH BROADWAY P. O. BOX 245 COAL CITY, IL 50416

Customer WILLIAMS BROTHERS CONST INC PO BOX 1366 PEORIA, IL 61654

Job Number: 22-40 Week Ending: 1/15/2023

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~~~~~~~~~~~~~~		exemp.	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Tot	Rate	All Jobs	State	Total	Net Pay
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Overt	ime	0.000		0.00						ij					
		0.000		0.00											

I, Courtney Schultz, Office Manager do hereby state:

1] That I pay or supervise the payment of the persons employed by ELLIOTT ELECTRIC, INC. on the (JOB) that during the payroll period commencing on 1/9/2023 and ending 1/15/2023, 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 ELLIOTT ELECTRIC, INC. from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CPR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

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.

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

XX—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) EXCEPTION (CRAFT)

EXPLANATION

REMARKS Name and title

Courtney Schultz, Office Manager
The Willful Falsification Of Any Of The Above Statements
Criminal Prosecution. See Section 1001 Of Title 18 And S May Subject the Contractor Or SubContractor To Civil Or action 231 OUTitle 31 Of The United States.

Contractor ELLIOTT ELECTRIC, INC. 1600 SOUTH BROADWAY P. O. BOX 245 **COAL CITY, 1L 60416** 

Quetomer WILLIAMS BROTHERS CONST INC PO BOX 1366 PEORIA, IL 61654

Job Number: 22-40 Week Ending: 1/22/2023

-- Deductions ---Soc Sec No. Fed. Local Hours Worked This Job Class 01/16 Gross Pan Fica 01/17 01/18 Other 01/19 01/20 Check 01/21 Name / Address / Phone 01/22 Mar Exemp Pay This Job Mon Med Time Wed Thu Fri Sat Sun Tot Rate All Jobs State Total Net Pay Hours Pax Regular 0.000 0.00 Overtime 0.000 0.00 n non

I, Courtney Schultz, Office Manager do hereby state:

1) That I pay or supervise the payment of the persons employed by ELLIOTT ELECTRIC, INC. on the (JOB) that during the payroll period commencing on 1/16/2023 and ending 1/22/2023, 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 ELLIGIT ELECTRIC, INC. from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described

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

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.

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

XX---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 (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) EXCEPTION (CRAFT) EXPLANATION

REMARKS

signature Dieuxun Courtney Schultz, Office Manager
The Willful Falsification Of Any Of The Above Statement The William Faising of the Above Statements way 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.

Contractor ELLICIT ELECTRIC, INC. 1600 SOUTH BROADWAY P. O. BOX 245 COAL CITY, IL 60416

Customer WILLTAMS BROTHERS CONST INC PO BOX 1366 DET BIA. IL 61654

Job Number: 22-40 Week Ending: 1/29/2023

	Soc.	Sec No.	*i			urs Wark		.%.					Dedu Fed.	ctions Local	
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during the payroll have been paid the to or on behalf of deductions have in permissible deduc-	ourtney Schultz, Office Ma That I pay or supervise ing the payroll period come been paid the full weekl r on behalf of said ELLIO uctions have been made a missible deductions as def Copeland Act, as amende w:				he per /2023 that n I.from ndirec	sons of and early or and early	ites hi Ill wei m the	ive be kly w full w	en or ages e ages e	an per will be arned arned	made by any by any	mployed either di person person.	on said rectly d and tha other	l proje ir Indire it no rhan	st ectly
contained in any value of the contained in a contai	That any payrolls otherwilete; that the wage rates lined in any wage determiner or mechanic conforminations any apprentices entered in a bona fide appraise of Apprenticeship and the are registered with the That;  (a) WHERE FRINGE BENI		on inc the wo ed in t eship j ling, u eau o	orpora irk he he ab progra inited f Appr	ited in perfor ove pa m reg States entice	to the med. erlod a istered in Department of the median contraction of	contr ire du 1 with rtmer nd Tr	act; they a Sta t of L aining	te app abor, o	e not classi rentice or if no d Stat	iess on fication ship a	an the ap is set for dency rea	oplicabl th then coonize	e wage ein for d by t	each
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ie benefit of such (B) WHERE I Each labore nount not less th		um of th	e app	tne a licable	bove i	referer hourh	rced p	ayroll	has b	een pa	ild, as	ndicated	on the	payro	
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(B) WHERE I Each labon amount not less the as listed in the cor	itract. ex	ent ac	notea	**************************************	THE PERSON NAMED IN		low."	e rate	plus t			Che requ		Inge be	II, an enefit:

Contractor ELLIOTT ELECTRIC, INC. 1600 SOUTH BROADWAY P. O. BOX 245 COAL CITY, IL 60416

Customer
WILLTAMS BROTHERS CONST INC
PO BOX 1366
PEORIA, IL 61654

Job Number: 22-40 Week Ending: 2/5/2023

Name / Address / Phone	Soc ( Class Mar	iec No. Exemp.	01/36 Mon	01/31 Tue		ours Worl 02/02 Thu	ted This 02/03 Fri	Job 02/04 Sat	02/05 Sun	Tot	Pay Rate	Gross Pay This Job All Jobs	Dedu Fed. Fica Med State	ctions — Local Other	Check #
:	Regular Overtime	Hours 0,000 0,000 0,000	<del></del>	Pay 0.00 0.00 0.00	****					(**** <b>**</b>			300C	Total	Net Pay
I, Courtney Schulb  1] That I pay or during the payroll been paid the full o on behalf of said E have been made e deductions as defir Act, as amended (**)	period oc weakly w LLIOTT I ther dire	se the pointment of the	aymer ing on irned, IC, INC ndirec	it of the 1/30, that in Life in the Life i	ne per /2023 o reb the f m the	rsons and e ates h ull we full w	ave b ekly v /ages	een or vages earne	will b earned d by a	e made d by an	e eithe y pers	iployed of directly on and the	n sald   or indir at no c	project ectly t leducti	have o or ons

2] That any payrells 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 4] That:

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

XX—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 (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 hounty wage rate plus the amount of the required fringe benefits (c) EXCEPTION (CRAFT)

EXPLANATION

Name and title
Courtney Schultz Office Manager

Signature
Courtney Schultz Office Manager

Name and title

Name and title

Courtney Schultz, Office Manager

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.

Contractor ELLIOTT ELECTRIC, INC. 1600 SOUTH BROADWAY P. O. BOX 245 COAL CITY, IL 60416

Customer WILLIAMS BROTHERS CONST INC PO BOX 1366 PEORIA, IL 61654

Job Number: 22-40 Week Ending: 2/12/2023

													Dedu	ctions		
	Soc S	ec No.	**********	<del></del>	Но	suc Minet	and Thin 1	tu.b.				aut i	Fed.	Local		
	Class		02/06	02/07	02/08	02/09	02/10	02/11			-64	Gross Pay	Fica	Other	Check #	
Name / Address / Phone	Mar	Exemp.	Mon	02/07 Tue	Wed	Thu	Fri	- 77	02/12		Pay	This Job	Med			
			:=		######			Sat	Sun	Tot	Rate	All Jobs	State	Total	Net Pay	
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		0.000		9.00 0.00 0.00 0.00												

I, Courtney Schultz, Office Manager do hereby state:

I, Courtney Schuitz, Office Manager do hereby state:

1] That I pay or supervise the payment of the persons employed by ELLIOTT ELECTRIC, INC. on the (JOB) that during the payroll period commencing on 2/6/2023 and ending 2/12/2023, 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 ELLIOTT ELECTRIC, INC. from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

2] That any psyrolls 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

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.

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

XX---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) EXCEPTION (CRAFT) EXPLANATION

REMARKS Name and title

signature out out of the Courtney Schultz, Office Manager The Willful Faishcation 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.

Contractor ELLIOTT ELECTRIC, INC. 1600 SOUTH BROADWAY P. O. BOX 245 COAL CITY, IL 60416

Customer WILLIAMS BROTHERS CONST INC **PEORIA, IL 61654** 

Job Number: 22-40 Week Ending: 2/19/2023

- Deductions --

	Soc 5	Sec No.	-		Ho	urs Work	ed Thic	loh	Augusta Kozkila Nolla, Navi			caso o seita a sia sa	Fed.	Local	
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<ol> <li>That I pay of during the payroll have been paid the to or on behalf of deductions have be permissible deductions</li> </ol>	said ELLI	okly wag	es eau	ned, C, INC	that n	o reba the fi	ites h	ekly w	en or ages e	will be	made by an	nployed either dii 'nerson	on said ectly o	r indire	t etty
permissible deduc the Copeland Act, below:	tione se e	CARAM !	in Manager	o Tarana da Paris da					ames c	:arrico	ov am	Oerson.	Other t	The same	ider Cribec

XX—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

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as listed in the contract, except as noted in Section 4(c) below.
(c) EXCEPTION (CRAFT) EXPLANATION REMARKS Name and title signature

Courtney Schultz, Office Manager

The Willful Palsification 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.

Contractor ELLIOTT ELECTRIC, INC. 1600 SOUTH BROADWAY P. O. BOX 245 COAL CITY, IL 60416

CUSTOME: WILLIAMS BROTHERS CONST INC PO BOX 1366 PEORIA, IL 61654

Job Number: 22-40 Week Ending: 2/26/2023

3] That any apprent registered in a bona fic Bufeau of Apprenticest a State, are registered 4] That:	ular 0.0 ime 0	p. Mon  MIS  MO  MO  MO  MO  MO  MO  MO  MO  MO  M	Bay 0.00 0.00 0.00 nereby nt of th or 2/20, irred, iC, INC thy or in juliation 948, 6	state; he pen /2023 that no .from ndirect ns, Par i3 Stat	sons e son e so reba the fully front 1 3 (2: 108,	emplo emplo ending ites his ill wee m the 9 CFR 72 St	yed by 2/26/ave be ekly wi full wi Subtiliat. 96	/ ELLIC 2023, sen or ages e ages e tie A), i7; 76	OTT Et all per will be earned earned lssued Stat. 3	sons e made by any by any by thi 57; 40	C, INC. o mployed either di person i person, e Secreta U.S.C. 2	on the ( on said rectly o rectly of addition other t ory of La 76c), a	JOB) ti projec r Indire t no han abor ur nd des	nat t cctly nder cribed
Regularization of Apprentices in a State, are registered at 15 Courtney Schultz, Of 17 That I pay or sup during the payroll perhave been paid the full to or on behalf of said deductions have been permissible deductions the Copeland Act, as a below:  2] That any payrolls complete; that the wag contained in any wage laborer or mechanic complete in a bona fid Bureau of Apprentices a State, are registered 4] That:	ular 0.0 ime 0	ug 000 000 ager do he e payment encing or wages ea ELECTRI her direct ad in Reg 48 Stat.	Bay 0.00 0.00 0.00 nereby nt of th or 2/20, irred, iC, INC thy or in juliation 948, 6	state; he per /2023 that no . from ndirect is, Par 33 Stat	sons e and e o reba the fi Uy froi t 3 (2) : 108,	emplo nding ites ha ill wee m the 9 CFR 72 St	yed by 2/26/ ave be kly wi full w Subtil at. 96	/ ELLI( 2023, en or ages e ages e tle A), 77; 76	OTT Et all per will be earned earned lssued Stat. 3	ECTRU sons e made by any by any l by th	C, INC. o mployed elther di person i person, e Secreta U.S.C. 2	on the ( on said rend the other t iry of La 76c), a	JOB) ti projec r Indire t no hen abor ur nd des	nat t ictly ider cribed
I, Courtney Schultz, Of  1] That I pay or sup during the payroll perk have been paid the ful to or on behalf of said deductions have been permissible deductions the Copeland Act, as a below;  2] That any payrolls complete; that the wag contained in any wage laborer or mechanic co 3] That any apprent registered in a bona fic Bureau of Apprentices a State, are registered 4] That:	ffice Mana pervise the od comme Il weekly ELLIOTT made eith as define mended (	ager do he paymentencing or wages ea ELECTRI ner directed in Reg 48 Stat.	0.00 0.00 nereby nt of the 2/20, irned, iC, INC thy or in julation 948, 6	state; he per /2023 that no .from ndirect ns, Par 33 Stat	sons e and e o reba the fi tly froi t 3 (2 : 108,	ites ha ull wee m the 9 CFR 72 St	ave be ekly wa full w Subtil at. 96	een or ages e ages e tle A), i7; 76	all per will be sarned sarned Issued Stat. 3	sons e made by any by any by thi 57; 40	mployed either di person i person, e Secreta U.S.C. 2	on said rectly o and tha other t iry of La 76c), ai	project indirect individual indivi	t ctly ider sribed
during the payroll perichave been paid the full to or on behalf of said deductions have been permissible deductions the Copeland Act, as a below:  2] That any payrolls complete; that the wag contained in any wage laborer or mechanic co 3] That any apprent registered in a bona fic Bureau of Apprenticesh a State, are registered 4] That:	pervise the od comment of the commen	e payment participation of the payment of the payme	nt of the 2/20, irred,	he pen /2023 that no C.from ndirect ns, Par i3 Stat	sons e and e o reba the fi tly froi t 3 (2 : 108,	ites ha ull wee m the 9 CFR 72 St	ave be ekly wa full w Subtil at. 96	een or ages e ages e tle A), i7; 76	all per will be sarned sarned Issued Stat. 3	sons e made by any by any by thi 57; 40	mployed either di person i person, e Secreta U.S.C. 2	on said rectly o and tha other t iry of La 76c), ai	project indirect individual indivi	t ctty ider sribed
(a) WHERE FRING PROGRAMS XX—In addition to payroll, payments of fit the benefit of such emp	determine the second of the se	ation income the work of the w	orpora ork he the abo progra Inited of Appro PAID T	performance performance per per per per per per per per per pe	to the med. eriod a isterect Depe ship a PROVE	contributed with internet ind Tributed	act; the state of Landing, NS, F	te app abor, c Unite	re not classi rentice or if no d Stati	ress the fication and the second and	an the ap is set for gency rec recognize artment	oplicable th there cognize d agen of Labo	e wage ein for d by th cy exis r.	rates each e ts in
(B) WHERE FRINGEach laborer or	ployees, e GE BENEF	ocept as TTS ARE	noted PAID	In Sec IN CAS	ction 4 SH	4(c) b	elow.	CH VYII	u ve m	aue 10	арргорп	ate pro	grams	for
Éach laborer or amount not less than the as listed in the contract (c) EXCEPTION (c	t. excent :	the app as noted	in Sec	basic tion 4( ANAT	(c) be	v wag low.	e rate	nas b plus t	een pa he am	ild, as ount o	indicated f the requ	on the Jired fri	payrol nge be	l, an nefits
	COMP 1)						, , , , , , , , , , , , , , , , , , ,				 REMA	RKS.		

Name and title
Courtney Schultz, Office Manager
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 1 Of The United States.

Contractor ELLIOTT ELECTRIC, INC. 1600 SOUTH BROADWAY P. O. BOX 245 COAL CITY, IL 60416

Customer WILLIAMS BROTHERS CONST INC PO BOX 1366 PEORIA, 1L 61654

Job Number: 22-40 Week Ending: 3/5/2023

		-1-1												ctions	
Name / Address / Phone	Soc 9 Class Mar	Sec No. Exemp.	02/27 Mon	02/28 Tue	Ho 03/01 Wed	iurs Worl 03/02 Thu	ced This 3 03/03 Fri	ob 03/04 Sat	03/05 Sun	Tot	Pay Rate	Gross Pay This Job All Jobs	Fed. Fica Med State	Local Other Total	Check #
Ą	Regular Overtime	Hours 0,000 0,000 0,000		Pay 0.00 0.00 0.00				# E 2 = 1	****			~~~~~~			

I, Courtney Schultz, Office Manager do hereby state:

I, Courtney Schultz, Office Manager do hereby state:

1] That I pay or supervise the payment of the persons employed by ELLIOTT ELECTRIC, INC. on the (JOB) that during the payroll period commencing on 2/27/2023 and ending 3/5/2023, 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 ELLIOTT ELECTRIC, INC.from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), Issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 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 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.

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

XX-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.

REMARKS Name and title signature

Courtney Schultz, Office Manager

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 91 Of The United States.

Contractor ELLIOTT ELECTRIC, INC. 1600 SOUTH BROADWAY P. O. BOX 245 COAL CITY, IL 60416

Customer WILLIAMS BROTHERS CONST INC PO BOX 1366 **PEORIA, IL 61654** 

Job Number: 22-40 Week Ending: 3/12/2023

Name / Address / Phone	Soc : Class Mar	iec No. Exemp.	03/06 Mon	03/07 Tue	Ho 03/08 Wed	urs Work 03/09 Thu	ed This ) 03/10 Pri	ob 03/11 Sat	03/12 Sun	Tot	Pay Rate	Gross Pay This Job All Jobs	— Dedu Fed. Fica Med State	ctions — Local Other Total	Check #
: ::	Regular Overtime	Hours 0.000 0.000 0.000		Pay 0.00 0.00 0.00				<b></b>		****		*******	W. L. 1860-13 A.		

I, Courtney Schultz, Office Manager do hereby state:

1) That I pay or supervise the payment of the persons employed by ELLIOTT ELECTRIC, INC. on the (JOB) that during the payroll period commencing on 3/6/2023 and ending 3/12/2023, 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 ELLIOTT ELECTRIC, INC. from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CPR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

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.

31 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** 

XX—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) EXCEPTION (CRAFT)

**EXPLANATION** REMARKS

signature Courtney Schultz, Office Manager

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.

Contractor ELLIOTT ELECTRIC, INC. 1600 SOUTH BROADWAY P. O. BOX 245 COAL CITY, IL 60416 Customer WILLIAMS BROTHERS CONST INC PO BOX 1366 PEDRIA, IL 61654

Job Number: 22-40 Week Ending: 3/19/2023

														ctions	
Name / Address / Phone	Clas Mar	Exemo.	03/13 Mon	03/14 Tue	Ho 03/15 Wed	03/16	03/17	03/18		Tot	Pay Rate	Gross Pay This Job All Jobs	Fed. Fica Med State	Local Other Total	Check
	Regular Overtime	Hours 0.000 0.000 0.000		Pay 0.00 0.00 0.00	-							=========	******		
1] That I pay of during the payrol have been paid to to or on behalf of deductions have permissible deduction Act below:	hé full we Said ELL been mad	ekly wa IOTT EL le either	Jes ea ECTRI direct	rned, C, INC ly or I	that n _from ndirec	o reba the fi tly fro	ites hi ull wei m the	ive be kly w full w	2023, en or ages e ages e	all per will be arned arned	made by any by an	mployed either di person person,	on sale rectly c and the other	l proje of indin at no than	actly
2] That any pactomplete; that the contained in any abover or mechan 3] That any apregistered in a boundaries of Appren a State, are registed.	wage det nic confor prentices ina fide a lticeship a tered with	erminati m with employ pprentic and Trair the Bu	on ince the we ed in t eship p ling, U reau o	orpora ork he he ab progra Inited f Appi	ited in perfor ove pr im reg States entice	ito the rmed. erlod a istere is Depa eship a	contr ire du d with irtmer ind Tr	act; they y a Sta t of L	te app abor, c	classi rentice or if no d Stat	iess ch fication ship a	an the ap ns set for gency rea	oplicabl th ther cognize	e wage ein for id by ti	each
(a) WHERE I PROGRAM XXIn additional payments the benefit of suc (B) WHERE	tion to the of fringe h employ FRINCE	e başic t benefit eas, exc	ourly s as lis ept as	wage ted in noted	rates the c	paid to ontrac	each t have 4(c) b	labor been slow.	er or r or wil	necha I be m	ace to	appropri	ate pro	grams	for
Each labor smount not less t as listed in the co (c) EXCEPTI	otract, ex	coept as	sted in le app noted	in Sec	bove basic tion 4 LANAT	(c) be	nced p y wag low.	ayroll e rate	has b plus t	een pa he am	nid, as ount o	Indicated f the requ	on the uired fr	payro inge bo	II, an Inefit
						- <del>18 - 18 - 18 - 18 - 18 - 18 - 18 - 18</del>						**************************************			
			**************************************						······································			REMA 	RKS		

Contractor ELLIOTT ELECTRIC. INC. 1600 SOUTH BROADWAY P. O. BOX 245 COAL CITY, IL 60416

Customer WILLIAMS BROTHERS CONST INC PO BOX 1366 PEORIA, IL 61654

Job Number: 22-40 Week Ending: 3/26/2023

-- Deductions ---

Fed. Soc Sec No. Local - Hours Worked This Job **Gross Pay** Fica Other 03/20 03/21 Check # 03/22 03/23 03/24 03/25 03/26 Name / Address / Phone Mar Exemp. This Job Mon Tue Wed Thu Fri Sat Sun Tot Quito All Jobs State Net Pay Total Hours Pay Regular 0.000 0.00 Overtime 0.000 0.00 I, Courtney Schultz, Office Manager do hereby state:

1] That I pay or supervise the payment of the persons employed by ELLIOTT ELECTRIC, INC. on the (JOB) that during the payroll period commencing on 3/20/2023 and ending 3/26/2023, all persons employed on said project during the payroll period commencing on 3/20/2023 and ending 3/20/2023, 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 ELLIOTT ELECTRIC, INC.from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described 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. 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. (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR **PROGRAMS** 

XX--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) EXCEPTION (CRAFT)

EXPLANATION REMARKS Name and title signatur**é** Courtney Schultz, Office Manager
The Willful Falsification Of Any Of The Above Statements Ma The Willful Falsification Of Any Of The Above Statements May Subject The Contractor Or SubContract Criminal Prosecution. See Section 1001 Of Title 18 And Section 231 Of Title 18 Of The United States. Aractor Or SubContractor To Civil Or



Case #: 23-CTP-069672

### Illinois Department of Labor

160 N. LaSalle St Suite1300 Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

# CERTIFIED TRANSCRIPT OF PAYROLL FORM

	AND THE REPORT OF THE PARTY OF
Payroli Date	Project Location
12/7/2022 to 12/13/2022	0
Contractor Number Or FEIN	Cresthill IL 60403
37-971661	No Work Report: Yes
Project Number or Name	State Capital Funds
3166-553	No
Agency	
Not a State Agency	
	Reference in the Control of the Cont
Company Name	Contractor Location
G. A. RICH & SONS INC.	PO BOX 50
Contact Name	DEER CREEK IL 61733
Katy 0 Miller	
Primary Email	Secondary Email
katy@garich.com	cp@wbci.us
Primary Phone	Secondary Phone
3094476231	

SALES AND THE PROPERTY OF THE	
Public Body Name	Public Body Address
City of Crest Hill	1610 PLAINFIELD RD
Contact Name	CREST HILL IL 60403
000	
Primary Phone	Secondary Phone
0	
0	

A CANADA MARKA	1661 1670 1680 1680 1680 1680 1680 1680 1680 168		Mills etsett	Durthy	البيعة بم		-14			o marka sa		
Name	Last4SSN	Classificati on	Address	City	Race	Ethnicity	G	٧	J	F	A	PhoneNumber
F	G-G	ender	V-Vetera	เท	J-Jou	neyman		F-Fo	reman		A-A	pprentice

N H L- Not Hispanic or Latino H L- Hispanic or Latino

		i i i		S) pro-	e etilej	ar t	e e e	Warter.		ttlon ::	***					
Name	Mon	Tue	Wed	Thr	Fri	Sat	Sun	Straight Hrs	Tot OT Hrs	Dub Tim Hrs		OT Wage Rate	Dbl Tim Wage	Gross	Net	No Wor k

I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project that during the payroll period commencing between mentioned above, 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 fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

Tammy Rich Stimson



0

## Case #: 23-CTP-069543

### Illinois Department of Labor

160 N. LaSalle St Suite1300 Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

## CERTIFIED TRANSCRIPT OF PAYROLL FORM

CENTITED INAIN.	3CRIFT OF PATROLL FORW
Payroll Date	Project Location
12/14/2022 to 12/20/2022	0
Contractor Number Or FEIN	Cresthill IL 60403
37-971661	
Project Number or Name	State Capital Funds
3166-553	No
Agency	
Not a State Agency	
	Candin Bubcontractor
Company Name	Contractor Location
G. A. RICH & SONS INC.	PO BOX 50
Contact Name	DEER CREEK IL 61733
Katy 0 Miller	
Primary Email	Secondary Email
katy@garich.com	cp@wbci.us
Primary Phone	Secondary Phone
3094476231	
S. W. S. S. S. S. S. S. S. Pub.	Belly identition
Public Body Name	Public Body Address
City of Crest Hill	1610 PLAINFIELD RD
Contact Name	CREST HILL IL 60403
000	
Primary Phone	Secondary Phone

555555555

Section Section		A SAME AND A SAME	ener	<u>زارط روع</u>	rit ek	lls						
Name	Last4SSN	Classificati on	Address	City	Race	Ethnicity	G	V	J	F	A	PhoneNumber
SCOTT NDARBY	8769	STEAMFITT ER	6480 HOWISON RD	SOMONAU K IL 60552	white	NHL	m	No	Yes	No	No	8154406773
MARK PFORD	5159	STEAMFITT ER	20352 S GRACELAND LN	FRANKFO RT IL 60423	white	NHL	m	No	Yes	No	No	8155738021
EVAN GSTROHACKER	0774	PLUMBER	8363 E EDWARDSVILL E RD	GERMAN VALLEY IL 61039	white	NHL	m	No	Yes	Yes	No	8159011317
	G-0	Sender	V-Vetera	ın	J-Jo	urneyman		F-Foi	reman		A-A	pprentice

N H L- Not Hispanic or Latino

H L- Hispanic or Latino

									tor g	rođe sa E	Carry I	est.	i in in	MA	1		
Name	Decree description of the contract of the cont	Mon	Tue	Wed	Thr	Fri	Sat	Sun	Straight Hrs	Tot OT Hrs	Dub Tim Hrs	Hourly Wage	OT Wage Rate	Dbl Tim Wage	Gross	Net	No Wor k
SCOTT NDARBY	Р	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1873.26	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Per	sion	0.00		Healt	h	0.00		Vacation	0.00		Training	0.00				
MARK PFORD	Р	0.00	0.00	0.00	5.00	2.00	0.00	0.00	7.00	0.00	0.00	53.00	0.00	0.00	371.00	1407.01	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Nagager Personalisas and a control of the control o	Pen	sion	64.73		Healt	h	77.87		Vacation	0.00		Training	19.19				
EVAN GSTROH ACKER	Р	0.00	0.00	0.00	5.00	2.00	0.00	0.00	7.00	0.00	0.00	56.00	0.00	0.00	392.00	1881.12	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2000-0-00-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0	Pen	sion	64.73	-	Healt	h	77.87		Vacation	0.00	-	Training	19.19	-	-		

I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project—that during the payroll period commencing between mentioned above, 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 fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

Tammy Rich Stimson



Primary Phone

0

Case #: 23-CTP-069677

### Illinois Department of Labor

160 N. LaSalle St Suite1300 Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

# CERTIFIED TRANSCRIPT OF PAYROLL FORM

	— CENTITED III	ANSCITITOTATIOEETOINI
	302384	
Payroll Date		Project Location
12/21/2022 to 12/27/202	22	0
Contractor Number Or	FEIN	Cresthill IL 60403
37-971661		No Work Report: Yes
Project Number or Nam	10	State Capital Funds
3166-553		No
Agency		
Not a State Agency		
		Triontractor 2
Company Name		Contractor Location
G. A. RICH & SONS INC.		PO BOX 50
Contact Name		DEER CREEK IL 61733
Katy 0 Miller		
Primary Email		Secondary Email
katy@garich.com		cp@wbci.us
Primary Phone		Secondary Phone
3094476231	++++++++++++++++++++++++++++++++++++++	200 C 100 C
		Mistic Body Recognition of the Control of the Contr
Public Body Name		Public Body Address
City of Crest Hill		1610 PLAINFIELD RD
Contact Name		CREST HILL IL 60403
000		

Secondary Phone

Name	Last4SSN	Classificati	Address	City	Race	Ethnicity	G	V	J	F	Α	PhoneNumber
	Lugtaggit	on				Lumicity		•		*		
	G-Gender		V-Veteran		J-Jou	×	F-Foreman			A-Apprentice		

N H L- Not Hispanic or Latino

H L- Hispanic or Latino

								Work Ci		Hon	2000 2000 2000 2000 2000	Na -			3	
Name	Mon	Tue	Wed	Thr	Fri	Sat	Sun	Straight Hrs	Tot OT Hrs	Dub Tim Hrs	Hourly Wage	OT Wage Rate	Dbl Tim Wage	Gross	Net	No Wor k

I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project that during the payroll period commencing between mentioned above, 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 fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

Tammy Rich Stimson



0

Case #: 23-CTP-069711

### **Illinois Department of Labor**

160 N. LaSalle St Suite1300 Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

# CERTIFIED TRANSCRIPT OF PAYROLL FORM

CERTIFIED IR	ANSCRIPT OF PAYROLL FORIVI
	PAYPERIOD
Payroll Date	Project Location
12/28/2022 to 1/3/2023	0
Contractor Number Or FEIN	Cresthill IL 60403
37-971661	No Work Report: Yes
Project Number or Name	State Capital Funds
3166-553	No
Agency	
Not a State Agency	
Cont.	ractor and/or Subcontractor
Company Name	Contractor Location
G. A. RICH & SONS INC.	PO BOX 50
Contact Name	DEER CREEK IL 61733
Katy 0 Miller	
Primary Email	Secondary Email
katy@garich.com	cp@wbci.us
Primary Phone	Secondary Phone
3094476231	
A STATE OF THE PARTY OF THE PAR	Public Body Inferigration 교육 기계
Public Body Name	Public Body Address
City of Crest Hill	1610 PLAINFIELD RD
Contact Name	CREST HILL IL 60403
000	
Primary Phone	Secondary Phone

555555555

Name	Last4SSN	Classificati	Address	City	Race	Ethnicity	G	٧	J	F	Α	PhoneNumber
		on									NAME OF THE PARTY	
	G-Gender		V-Veteran		J-Journeyman			F-Foreman		A-Apprentice		

N H L- Not Hispanic or Latino H L- Hispanic or Latino

	1137							- 1	Mark Ci	issifica	tica 📜							
**************************************	Name	Mon	Tue	Wed	Thr	Fri	Sat	Sun	Straight Hrs	Tot OT Hrs		Hourly Wage	OT Wage Rate	Dbl Tim Wage	Gross	Net	No Wor k	

I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project—that during the payroll period commencing between mentioned above, 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 fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

Tammy Rich Stimson



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Case #: 23-CTP-069712

### Illinois Department of Labor

160 N. LaSalle St Suite1300 Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

## CERTIFIED TRANSCRIPT OF PAYROLL FORM

CERTIFIEL	D TRANSCRIPT OF PAYROLL FORIVI
	PAY PERIOD THE STATE OF THE STA
Payroll Date	Project Location
1/4/2023 to 1/10/2023	0
Contractor Number Or FEIN	Cresthill IL 60403
37-971661	No Work Report: Yes
Project Number or Name	State Capital Funds
3166-553	No
Agency	
Not a State Agency	
	Contractor and/or Subcontractor
Company Name	Contractor Location
G. A. RICH & SONS INC.	PO BOX 50
Contact Name	DEER CREEK IL 61733
Katy 0 Miller	
Primary Email	Secondary Email
katy@garich.com	cp@wbci.us
Primary Phone	Secondary Phone
3094476231	
	Public Body Information . The Property of the
Public Body Name	Public Body Address
City of Crest Hill	1610 PLAINFIELD RD
Contact Name	CREST HILL IL 60403
0 0 0	
Primary Phone	Secondary Phone

555555555

Secondaring of					e Bestell	is	- 1			in.			
Name	Last4SSN	Classificati	Address	City	Race	Ethnicity	G	V	J	F	Α	PhoneNumber	
		on							***************************************				
	G-Gender		V-Veteran		J-Journeyman			F-Foreman			A-Apprentice		

N H L- Not Hispanic or Latino H L- Hispanic or Latino

				Works		7			
Name Mon	Tue Wed	Thr Fri	Sat Sun		Tot OT Dub Hrs Hrs	 Wage 1	Dbl Gross Tim Wage	Net	No Wor k

I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project—that during the payroll period commencing between mentioned above, 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 fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

Tammy Rich Stimson



Case #: 23-CTP-069714

### Illinois Department of Labor

160 N. LaSalle St Suite1300 Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

# CERTIFIED TRANSCRIPT OF PAYROLL FORM

CERTIFIED TRANSCRIP	T OF PAYROLL FORIVI
PAY D	ERIOD AND AND AND AND AND AND AND AND AND AN
Payroll Date	Project Location
1/11/2023 to 1/17/2023	0
Contractor Number Or FEIN	Cresthill IL 60403
37-971661	No Work Report: Yes
Project Number or Name	State Capital Funds
3166-553	No
Agency	
Not a State Agency	
Chingese and/	or Subcontractor
Company Name	Contractor Location
G. A. RICH & SONS INC.	PO BOX 50
Contact Name	DEER CREEK IL 61733
Katy 0 Miller	
Primary Email	Secondary Email
katy@garich.com	cp@wbci.us
Primary Phone	Secondary Phone
3094476231	
Children and Child	Information see
Public Body Name	Public Body Address
City of Crest Hill	1610 PLAINFIELD RD
Contact Name	CREST HILL IL 60403
000	
Primary Phone	Secondary Phone
0	555555555
The state of the s	

	3					s i							
Name	Last4SSN	Classificati	Address	City	Race	Ethnicity	G	V	J	F	Α	PhoneNumber	
		on								***************************************			
	G-Gender		V-Veteran		J-Journeyman			F-Foreman			A-Apprentice		

N H L- Not Hispanic or Latino H L- Hispanic or Latino

		· Werts d	assitistation:			
Name Mon Tu	Wed Thr Fri	Sat Sun Straight Hrs	Tot OT Dub Tim Hrs Hrs	Hourly OT Wage Wage Rate	Dbi Gross Tim Wage	Net No Wor k

I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project—that during the payroll period commencing between mentioned above, 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 fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

Tammy Rich Stimson



Case #: 23-CTP-069716

### Illinois Department of Labor

160 N. LaSalle St Suite1300 Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

# CERTIFIED TRANSCRIPT OF PAYROLL FORM

(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	
Payroll Date	Project Location
1/18/2023 to 1/24/2023	0
Contractor Number Or FEIN	Cresthill IL 60403
37-971661	No Work Report: Yes
Project Number or Name	State Capital Funds
3166-553	No
Agency	
Not a State Agency	

Company Name	Contractor Location
G. A. RICH & SONS INC.	PO BOX 50
Contact Name	DEER CREEK IL 61733
Katy 0 Miller	
Primary Email	Secondary Email
katy@garich.com	cp@wbci.us
Primary Phone	Secondary Phone
3094476231	

A STATE OF THE PROPERTY OF THE PUBLICATION OF THE P	
Public Body Name	Public Body Address
City of Crest Hill	1610 PLAINFIELD RD
Contact Name	CREST HILL IL 60403
000	
Primary Phone	Secondary Phone
0	555555555

Name	Last4SSN	Classificati	Address	City	Race	Ethnicity	G	V	J	F	Α	PhoneNumber	
		on								200			
	G-Gender		V-Veteran		J-Journeyman			F-Foreman			A-Apprentice		

N H L- Not Hispanic or Latino H L- Hispanic or Latino

		12	<b>M</b>						erer a	essifica	tion :					ħ.	
Name	M	lon	Tue	Wed	Thr	Fri	Sat	Sun	Straight Hrs	Tot OT Hrs	Dub Tim Hrs	Hourly Wage	OT Wage Rate	Dbl Tim Wage	Gross	Net	No Wor k

I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project that during the payroll period commencing between mentioned above, 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 fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

Tammy Rich Stimson



## Case #: 23-CTP-069720

## Illinois Department of Labor

160 N. LaSalle St Suite1300 Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

# CERTIFIED TRANSCRIPT OF PAYROLL FORM

Payroll Date	Project Location
2/1/2023 to 2/7/2023	0
Contractor Number Or FEIN	Cresthill IL 60403
37-971661	
Project Number or Name	State Capital Funds
3166-553	No
Agency	
Not a State Agency	

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<u> </u>			

Company Name	Contractor Location
G. A. RICH & SONS INC.	PO BOX 50
Contact Name	DEER CREEK IL 61733
Katy 0 Miller	
Primary Email	Secondary Email
katy@garich.com	cp@wbci.us
Primary Phone	Secondary Phone
3094476231	

	Public Body information in a supply to the supply of the supply s
Public Body Name	Public Body Address
City of Crest Hill	1610 PLAINFIELD RD
Contact Name	CREST HILL IL 60403
000	
Primary Phone	Secondary Phone
0	555555555

Name	Last4SSN	Classificati on	Address	City	Race	Ethnicity	G	٧	J	F	Α	PhoneNumbe
BILLY D.GALLION	7745	OPERATOR	1420 WATER ST	MORRIS IL 60450	white	NHL	m	No	Yes	No	No	8155312413
TATE JMOORE	0521	PLUMBER	631 FARM VIEW AVE	BOURBON NAIS IL 60914	white	NHL	m	No	No	No	Yes	7085368416
TRAVIS AWEBER	5609	PLUMBER	702 W MAIN ST	LEXINGTO N IL 61753	white	NHL	m	No	No	No	No	3095317155

F-Foreman

N H L- Not Hispanic or Latino H L- Hispanic or Latino

					UK BY						ilion ,			tal			
Name		Mon	Tue	Wed	Thr	Fri	Sat	Sun	Straight Hrs	Tot OT Hrs	Dub Tim Hrs		OT Wage Rate	Dbl Tim Wage	Gross	Net	No Wor k
BILLY D.GALLIO N	Р	8.50	8.50	0.00	0.00	0.00	0.00	0.00	16.00	1.00	0.00	57.10	85.65	0.00	999.25	1111.20	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Per	sion	23.25		Healt	h	33.23		Vacation	0.00		Training	0.00				-
TATE JMOORE	Р	8.00	8.00	0.00	0.00	0.00	0.00	0.00	16.00	0.00	0.00	21.20	0.00	0.00	339.20	282.45	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Per	sion	0.00		Healt	h	3.00		Vacation	0.00		Training	0.00				
TRAVIS AWEBER	Р	8.00	8.00	0.00	0.00	0.00	0.00	0.00	16.00	0.00	0.00	53.00	0.00	0.00	848.00	1397.06	
***************************************	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
West Survivorse	Per	sion	27.85		Healt	h	24.98		Vacation	0.00		Training	2.92			·	

I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project that during the payroll period commencing between mentioned above, 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 fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

Tammy Rich Stimson



## Case #: 23-CTP-069556

### Illinois Department of Labor

160 N. LaSalle St Suite1300 Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

## CERTIFIED TRANSCRIPT OF PAYROLL FORM

CERTIFIED TRA	ANSCRIPT OF PAYROLL FORIVI
Payroll Date	Project Location
1/25/2023 to 1/31/2023	0
Contractor Number Or FEIN	Cresthill IL 60403
37-971661	
Project Number or Name	State Capital Funds
3166-553	No
Agency	
Not a State Agency	
	Se canada tubconfractor
Company Name	Contractor Location
G. A. RICH & SONS INC.	PO BOX 50
Contact Name	DEER CREEK IL 61733
Katy 0 Miller	
Primary Email	Secondary Email
katy@garich.com	cp@wbci.us
Primary Phone	Secondary Phone
3094476231	
	ethic lody information is a specimen with a second survey of the second
Public Body Name	Public Body Address
City of Crest Hill	1610 PLAINFIELD RD
Contact Name	CREST HILL IL 60403
000	
Primary Phone	Secondary Phone

555555555

e de la companya de La companya de la companya de l			4	Employe	5/1/3/20	lis.				-		
Name	Last4SSN	Classificati on	Address	City	Race	Ethnicity	G	٧	J	F	A	PhoneNumber
CURTIS JSTECHMAN	3214	STEAMFITT ER	8 FAIRFAX CT	MACKINA W IL 61755	white	NHL	m	No	Yes	Yes	No	3093598659
			.l		1 1		1					

G-Gender

V-Veteran

J-Journeyman

F-Foreman

A-Apprentice

N H L- Not Hispanic or Latino

H L- Hispanic or Latino

Name	STATE OF THE STATE	Mon	Tue	Wed	Thr	Fri	Sat	Sun	Straight Hrs	Tot OT Hrs	Dub Tir Hrs	Nage	OT Wage Rate	Dbl Tim Wage	Gross	Net	No Work
CURTIS ISTECHM AN	Р	8.00	0.00	0.00	0.00	0.00	0.00	0.00	8.00	0.00	0.0	47.46	0.00	0.00	379.68	1112.01	
	NΡ	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.0	0.00	0.00	0.00	0.00	0.00	

I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project that during the payroll period commencing between mentioned above, 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 fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

Tammy Rich Stimson



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Case #: 23-CTP-069629

#### **Illinois Department of Labor**

160 N. LaSalle St Suite1300 Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

## CERTIFIED TRANSCRIPT OF PAYROLL FORM

CERTITE	D TRANSCRIPT OF FATROLL FORM
	CONTRACTOR OF THE PROPERTY OF
Payroll Date	Project Location
2/8/2023 to 2/14/2023	0
Contractor Number Or FEIN	Cresthill IL 60403
37-971661	
Project Number or Name	State Capital Funds
3166-553	No
Agency	
Not a State Agency	
	Complian and for Subcollivación
Company Name	Contractor Location
G. A. RICH & SONS INC.	PO BOX 50
Contact Name	DEER CREEK IL 61733
Katy 0 Miller	
Primary Email	Secondary Email
katy@garich.com	cp@wbci.us
Primary Phone	Secondary Phone
3094476231	
	Publication
Public Body Name	Public Body Address
City of Crest Hill	1610 PLAINFIELD RD
Contact Name	CREST HILL IL 60403
0 0 0	
Primary Phone	Secondary Phone

555555555

			<b>1997</b>	<u> Employe</u>	e <b>cil</b> ti	House.	-					
Name	Last4SSN	Classificati on	Address	City	Race	Ethnicity	G	V	J	F	Α	PhoneNumber
JAMES DCONOUR	2429	STEAMFITT ER	750 DARTMOUTH DR	ISLAND LAKE IL 60042	white	NHL	m	No	Yes	No	No	8475262839
BILLY D.GALLION	7745	OPERATOR	1420 WATER ST	MORRIS IL 60450	white	NHL	m	No	Yes	No	No	8155312413
TATE JMOORE	0521	PLUMBER	631 FARM VIEW AVE	BOURBON NAIS IL 60914	white	NHL	m	No	No	No	Yes	7085368416
TRAVIS AWEBER	5609	PLUMBER	702 W MAIN ST	LEXINGTO N IL 61753	white	NHL	m	No	No	No	No	3095317155
	G-G	ender	V-Vetera	an	J-Joi	urneyman		F-For	eman		A-A	prentice

F-Foreman

N H L- Not Hispanic or Latino H L- Hispanic or Latino

	· 7), 6.540 				e T		i e		No.		SOF "	-				ŽL.	
Name		Mon	Tue	Wed	Thr	Fri	Sat	Sun	Straight Hrs	Tot OT Hrs	Dub Tim Hrs	Hourly Wage	OT Wage Rate	Dbl Tim Wage	Gross	Net	No Wor k
JAMES DCONOU R	Р	8.00	8.00	8.00	0.00	0.00	0.00	0.00	24.00	0.00	0.00	53.00	0.00	0.00	1272.00	1004.36	
	NΡ	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Per	sion	13.13		Healt	h	15.80		Vacation	0.00		Training	3.89				
BILLY D.GALLIO N	Р	8.50	8.50	8.50	0.00	8.50	0.00	0.00	32.00	2.00	0.00	57.10	85.65	0.00	1998.50	1455.92	
	NΡ	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
***************************************	Per	sion	15.50		Healt	h	22.15		Vacation	0.00		Training	0.00				
TATE JMOORE	Р	8.00	0.00	8.00	0.00	8.00	0.00	0.00	24.00	0.00	0.00	21.20	0.00	0.00	508.80	409.74	
	NΡ	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Per	sion	0.00		Healt	h	3.00		Vacation	0.00		Training	0.00				
TRAVIS AWEBER	Р	8.00	8.00	8.00	0.00	8.00	0.00	0.00	32.00	0.00	0.00	53.00	0.00	0.00	1696.00	1392.78	
***************************************	NΡ	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
30000000000000000000000000000000000000	Per	sion	11.35		Healt	h	12.94		Vacation	0.00		Training	2.92				

I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project—that during the payroll period commencing between mentioned above, 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 fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

Tammy Rich Stimson Mar 30, 2023



Case #: 23-CTP-069641

### Illinois Department of Labor

160 N. LaSalle St Suite1300 Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

# CERTIFIED TRANSCRIPT OF PAYROLL FORM

Payroll Date	Project Location
2/15/2023 to 2/21/2023	0
Contractor Number Or FEIN	Cresthill IL 60403
37-971661	
Project Number or Name	State Capital Funds
3166-553	No
Agency	
Not a State Agency	
	Opportunition of the second of
Company Name	Contractor Location
G. A. RICH & SONS INC.	PO BOX 50

Company Name	Contractor Location
G. A. RICH & SONS INC.	PO BOX 50
Contact Name	DEER CREEK IL 61733
Katy 0 Miller	
Primary Email	Secondary Email
katy@garich.com	cp@wbci.us
Primary Phone	Secondary Phone
3094476231	WITTER TO THE TOTAL PROPERTY OF THE TOTAL PR

	AND THE RESERVE OF THE PERSON
Public Body Name	Public Body Address
City of Crest Hill	1610 PLAINFIELD RD
Contact Name	CREST HILL IL 60403
000	***************************************
Primary Phone	Secondary Phone
0	555555555

HE CONTROL	A)	The Residen	ARRA HERM		e Dek	ile.						
Name	Last4SSN	Classificati on	Address	City	Race	Ethnicity	G	V	J	F	Α	PhoneNumbe
GEORGE BAIMONE IV	8941	OPERATOR	7975 S OLD MAZON RD	GARDNER IL 60424	white	NHL	m	No	Yes	No	No	8156515327
James Dconour	2429	STEAMFITT ER	750 DARTMOUTH DR	ISLAND LAKE IL 60042	white	NHL	m	No	Yes	No	No	8475262839
BILLY D.GALLION	7745	OPERATOR	1420 WATER ST	MORRIS IL 60450	white	NHL	m	No	Yes	No	No	8155312413
TATE JMOORE	0521	PLUMBER	631 FARM VIEW AVE	BOURBON NAIS IL 60914	white	NHL	m	No	No	No	Yes	7085368416
CURTIS JSTECHMAN	3214	STEAMFITT ER	8 FAIRFAX CT	MACKINA W IL 61755	white	NHL	m	No	Yes	Yes	No	3093598659
TRAVIS AWEBER	5609	PLUMBER	702 W MAIN ST	LEXINGTO N IL 61753	white	NHL	m	No	No	Yes	No	3095317155
1 11 11 11 11 11 11 11 11 11 11 11 11 1	G-G	ender	V-Vetera	an	J-Jo	urneyman		F-For	eman		A-At	prentice

N H L- Not Hispanic or Latino H L- Hispanic or Latino

	36.4			. 48	£ 7.7					e Ge	den		100,000		17.440		
Name		Mon	Tue	Wed	Thr	Fri	Sat	Sun	Straight Hrs	Tot OT Hrs	Dub Tim Hrs	Hourly Wage	OT Wage Rate	Dbl Tim Wage	Gross	Net	No Wo k
GEORGE BAIMON E IV	Р	0.00	8.00	0.00	0.00	0.00	0.00	0.00	8.00	0.00	0.00	55.30	0.00	0.00	442.40	379.29	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Pen	sion	15.50		Healt	h	22.15		Vacation	0.00		Training	0.00				
James Dconou R	Р	0.00	8.00	8.00	4.00	8.00	0.00	0.00	24.00	4.00	0.00	53.00	79.50	0.00	1590.00	940.14	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Г
······································	Pen	sion	9.85		Healt	h	11.85		Vacation	0.00		Training	2.92	•	**************************************		
BILLY D.GALLIO N	Р	0.00	0.00	8.50	8.50	8.50	0.00	0.00	20.00	5.50	0.00	57.10	85.65	0.00	1613.07	1847.40	
•••••	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Г
	Pen	sion	25.83		Healt	h	36.92		Vacation	0.00		Training	0.00				
TATE JMOORE	Р	0.00	0.00	8.00	4.00	8.00	0.00	0.00	16.00	4.00	0.00	21.20	31.80	0.00	466.40	379.23	
	NΡ	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	

	Pen	sion	0.00		Health	1	3.00		Vacation	0.00		Training	0.00				
CURTIS JSTECHM AN	Р	8.00	0.00	0.00	0.00	0.00	0.00	0.00	8.00	0.00	0.00	47.46	0.00	0.00	379.68	1112.01	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Такконодинеской устройской физической концией	Pen	sion	72.00		Health	<u> </u>	43.75		Vacation	0.00		Training	0.50		<u> </u>		
TRAVIS AWEBER	Pen	sion 0.00		8.00		4.00		0.00			0.00	<u> </u>	0.50	0.00	1008.00	1479.68	
		0.00	0.00				0.00	0.00	12.00	4.00	0.00	56.00		0.00	1008.00	1479.68	

I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project that during the payroll period commencing between mentioned above, 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 fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

Tammy Rich Stimson



## Case #: 23-CTP-069647

### Illinois Department of Labor

160 N. LaSalle St Suite1300 Chicago, IL 60601

Dol.certifiedpayroll@Illinois.gov • Phone: (312) 793-3600

## CERTIFIED TRANSCRIPT OF PAYROLL FORM

CERTIFIED	TRANSCRIPT OF PAYROLL FORM
	The second s
Payroll Date	Project Location
2/22/2023 to 2/28/2023	0
Contractor Number Or FEIN	Cresthill IL 60403
37-971661	
Project Number or Name	State Capital Funds
3166-553	No
Agency	
Not a State Agency	
	Silving (Ind/Openitor)
Company Name	Contractor Location
G. A. RICH & SONS INC.	PO BOX 50
Contact Name	DEER CREEK IL 61733
Katy 0 Miller	
Primary Email	Secondary Email
katy@garich.com	cp@wbci.us
Primary Phone	Secondary Phone
3094476231	
	AV RULITE LINK MICHIGANIA CONTROLLAR CONTROL
Public Body Name	Public Body Address
City of Crest Hill	1610 PLAINFIELD RD
Contact Name	CREST HILL IL 60403
0 0 0	
Primary Phone	Secondary Phone
0	555555555

Land Street					- Data			-		**************************************		
Name	Last4SSN	Classificati on	Address	City	Race	Ethnicity	G	<b>V</b>	J	F	Α	PhoneNumber
GEORGE BAIMONE IV	8941	OPERATOR	7975 S OLD MAZON RD	GARDNER IL 60424	white	NHL	m	No	Yes	No	No	8156515327
JAMES DCONOUR	2429	STEAMFITT ER	750 DARTMOUTH DR	ISLAND LAKE IL 60042	white	NHL	m	No	Yes	No	No	8475262839
TATE JMOORE	0521	PLUMBER	631 FARM VIEW AVE	BOURBON NAIS IL 60914	white	NHL	m	No	No	No	Yes	7085368416
CURTIS JSTECHMAN	3214	STEAMFITT ER	8 FAIRFAX CT	MACKINA W IL 61755	white	NHL	m	No	Yes	Yes	No	3093598659
TRAVIS AWEBER	5609	PLUMBER	702 W MAIN ST	LEXINGTO N IL 61753	white	NHL	m	No	No	Yes	No	3095317155

G-Gender

V-Veteran

J-Journeyman

F-Foreman

A-Apprentice

N H L- Not Hispanic or Latino

Н	L-	His	oanic	or	Latino

									Hork St		dan j		mil.				
Name		Mon	Tue	Wed	Thr	Fri	Sat	Sun	Straight Hrs	Tot OT Hrs	Dub Tim Hrs	Hourly Wage	OT Wage Rate	Dbl Tim Wage	Gross	Net	No Wor k
GEORGE BAIMON E IV	Р	0.00	8.50	0.00	0.00	0.00	0.00	0.00	8.00	0.50	0.00	55.30	82.95	0.00	483.87	1246.04	
200.000.0000.00000000000000000000000000	NΡ	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Pen	sion	46.50		Healt	h	66.45		Vacation	0.00		Training	0.00				
JAMES DCONOU R	Р	0.00	8.00	5.00	2.00	0.00	0.00	0.00	15.00	0.00	0.00	53.00	0.00	0.00	795.00	439.99	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
5	Pen	sion	9.85		Healt	h	11.85		Vacation	0.00	•	Training	2.92		<u> </u>		<del></del>
TATE JMOORE	Р	0.00	8.00	0.00	0.00	0.00	0.00	0.00	8.00	0.00	0.00	21.20	0.00	0.00	169.60	144.86	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
<u>ia</u>	Pen	sion	0.00		Healt	h	3.00		Vacation	0.00		Training	0.00				
CURTIS JSTECHM AN	Р	8.00	0.00	0.00	8.00	0.00	0.00	0.00	16.00	0.00	0.00	47.46	0.00	0.00	759.36	1112.51	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Torre species copies grown	Pen	sion	36.28		Healt	h	20.83	-	Vacation	0.00		Training	0.20				

TRAVIS AWEBER	Р	0.00	8.00	0.00	0.00	0.00	0.00	0.00	8.00	0.00	0.00	56.00	0.00	0.00	448.00	1234.38	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Pension		46.60		Health	)	38.65		Vacation	0.00		Training	2.92				

I, do hereby state: that I pay or supervise the payment of the persons employed on the public works project—that during the payroll period commencing between mentioned above, 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 fully weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full weekly wages earned by any persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates herein stated and that the classification set forth for each laborers, workers, or mechanic conform to the work he/she performed

Tammy Rich Stimson Mar 30, 2023