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Case #: 22-CTP-091489

Illinois Department of Labor

160 N. LaSalle St Suite1300 Chicago, IL 60601

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

CERTIFIED TRANSCRIPT OF PAYROLLFORM

CERTIFIED IR	ANSCRIPT OF PAYROLLFORIVI
	PAY PERIOD
Payroll Date	Project Location
2/24/2022 to 3/2/2022	2250 N BROADWAY ST
Contractor Number Or FEIN	CREST HILL IL 60403
370971367	
Project Number or Name	State Capital Funds
Crest Hill	No
Agency	
Not a State Agency	
Cont	ractor 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	0
Primary Phone	Secondary Phone
3096880416	
	Public Body Information
Public Body Name	Public Body Address
Crest Hill	2250 N BROADWAY ST
Contact Name	CREST HILL IL 60403
0 0 0	
Primary Phone	Secondary Phone

0

				Employe	e Deta	ils						
Name	Last4SSN	Classificati on	Address	City	Race	Ethnicity	G	V	J	F	A	PhoneNumber
CORY JHAMMERSTEIN	9830	LABORER J	25953 W SANDY KNOLL DR	CHANNAH ON IL 60410	white	NHL	m	No	Yes	Yes	No	8155572759
	G-G	ender	V-Vetera	an	J-Jo	urneyman	-	F-For	eman		A-A	pprentice

N H L- Not Hispanic or Latino

H L- Hispanic or Latino

								1	Work Cl	assifica	ation							
Name		Mon	Tue	Wed	Thr	Fri	Sat	Sun	Straight Hrs	Tot OT Hrs	Dub 1 Hrs		Hourly Wage	OT Wage Rate	Dbl Tim Wage	Gross	Net	No Wor
CORY JHAMME RSTEIN	P	0.00	4.00	0.00	0.00	0.00	0.00	0.00	4.00	0.00	C	0.00	47.40	0.00	0.00	189.60	1050.63	
	NP	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	C	0.00	0.00	0.00	0.00	0.00	0.00	
	Per	sion	14.96		Healt	h	7.25		Vacation	0.00			Training	0.80				

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



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CERTIFIED TRANSCRIPT OF PAYROLLFORM **PAY PERIOD Project Location Payroll Date** 3/3/2022 to 3/9/2022 2250 N BROADWAY ST CREST HILL IL 60403 **Contractor Number Or FEIN** 370971367 State Capital Funds Project Number or Name No Crest Hill Agency Not a State Agency Contractor 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	0
Primary Phone	Secondary Phone
3096880416	

Public Body Information
Public Body Address
2250 N BROADWAY ST
CREST HILL IL 60403
Secondary Phone
0

				Employe	e Deta	ils						
Name	Last4SSN	Classificati on	Address	City	Race	Ethnicity	G	V	J	F	A	PhoneNumbe
CORY JHAMMERSTEIN	9830	LABORER J	25953 W SANDY KNOLL DR	CHANNAH ON IL 60410	white	NHL	m	No	Yes	Yes	No	8155572759
JASON RUTLEDGE	9690	CARPENTE R J	1212 TILTON PARK DR	ROCHELL E IL 61068	white	NHL	m	No	Yes	No	No	8159705351
	G-G	ender	V-Vetera	an	J-Joi	ımeyman		F-For	eman		A-A	pprentice

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

	Work Classification																
Name		Mon	Tue	Wed	Thr	Fri	Sat	Sun	Straight Hrs	Tot OT Hrs	Dub Tim Hrs	Hourly Wage	OT Wage Rate	Dbi Tim Wage	Gross	Net	No Work
CORY JHAMME RSTEIN	Р	6.00	1.00	0.00	0.00	0.00	0.00	0.00	7.00	0.00	0.00	47.40	0.00	0.00	331.80	1458.19	
	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	14.96	•	Healt	h	7.25		Vacation	0.00		Training	0.80				
JASON RUTLEDG E	Р	2.00	1.00	0.00	1.00	2.00	0.00	0.00	6.00	0.00	0.00	55.50	0.00	0.00	333.00	1479.41	
	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	19.15	***	Healt	h	9.20		Vacation	0.00		Training	0.63				

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CERTIFIED TRANSCRIPT OF PAYROLLFORM PAY PERIOD

	PATECHOU
Payroll Date	Project Location
3/10/2022 to 3/16/2022	2250 N BROADWAY ST
Contractor Number Or FEIN	CREST HILL IL 60403
370971367	
Project Number or Name	State Capital Funds
Crest Hill	No
Agency	
Not a State Agency	

Contractor 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	0
Primary Phone	Secondary Phone
3096880416	

	Public Body Information
Public Body Name	Public Body Address
Crest Hill	2250 N BROADWAY ST
Contact Name	CREST HILL IL 60403
000	
Primary Phone	Secondary Phone
0	0

				Employe	e Deta	ils						
Name	Last4SSN	Classificati on	Address	City	Race	Ethnicity	G	V	J	F	A	PhoneNumbe
CORY JHAMMERSTEIN	9830	LABORER J	25953 W SANDY KNOLL DR	200 0 000 000 000 000	white	NHL	m	No	Yes	Yes	No	8155572759

G-Gender V-Veteran J-Journeyman

F-Foreman A-Apprentice

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

	Work Classification																
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
CORY JHAMME RSTEIN	Р	3.50	8.00	5.50	0.00	8.00	0.00	0.00	25.00	0.00	0.00	47.40	0.00	0.00	1185.00	1458.19	
	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	14.96		Healt	h	7.25		Vacation	0.00		Training	0.80	.,	19		-

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CERTIFIED TRANSCRIPT OF PAYROLLFORM

CERTIFIEL	TRANSCRIPT OF PAYROLLFORIVI
	PAY PERIOD
Payroll Date	Project Location
3/17/2022 to 3/23/2022	2250 N BROADWAY ST
Contractor Number Or FEIN	CREST HILL IL 60403
370971367	
Project Number or Name	State Capital Funds
Crest Hill	No
Agency	
Not a State Agency	
	Contractor 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	0
Primary Phone	Secondary Phone
3096880416	
	Public Body Information
Public Body Name	Public Body Address
Crest Hill	2250 N BROADWAY ST
Contact Name	CREST HILL IL 60403
000	
Primary Phone	Secondary Phone
0	0

				Employe	e Deta	ils							
Name	Last4SSN	Classificati on	Address	City	Race	Ethnicity	G	V	J	F	A	PhoneNumber	
CORY JHAMMERSTEIN	9830	LABORER J	25953 W SANDY KNOLL DR	CHANNAH ON IL 60410	white	NHL	m	No	Yes	Yes	No	8155572759	
	G-Gender		V-Vetera	J-Journeyman			F-Foreman				A-Apprentice		

N H L- Not Hispanic or Latino

H L- Hispanic or Latino

	Work Classification																
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 Work
CORY JHAMME RSTEIN	Р	8.00	0.00	8.00	8.00	8.00	0.00	0.00	32.00	0.00	0.00	47.40	0.00	0.00	1516.80	1186.49	
	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	14.96		Healt	h	7.25		Vacation	0.00		Training	0.80				

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CERTIFIED TRANSCRIPT OF PAYROLL FORM

CERTIFIED	TRANSCRIPT OF PAYROLL FORM
	PAY PERIOD
Payroll Date	Project Location
7/14/2022 to 7/20/2022	2250 N BROADWAY ST
Contractor Number Or FEIN	CREST HILL IL 60403
370971367	
Project Number or Name	State Capital Funds
Crest Hill	No
Agency	
Not a State Agency	
自是是是这位的,但是是自己的	Contractor 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	0
Primary Phone	Secondary Phone
3096880416	
	Public Body Information
Public Body Name	Public Body Address
Crest Hill	2250 N BROADWAY ST
Contact Name	CREST HILL IL 60403
0 0 0	
Primary Phone	Secondary Phone
0	0
A PART OF THE PROPERTY OF THE PART OF THE	

Employee Details												
Name	Last4SSN	Classificati on	Address	City	Race	Ethnicity	G	V	J	F	A	PhoneNumber
CORY JHAMMERSTEIN	9830	LABORER J	25953 W SANDY KNOLL DR	CHANNAH ON IL 60410	white	NHL	m	No	Yes	Yes	No	8155572759
WAYNE RLINDSEY	7184	OPR ENG/GR 1	6810 HILLCREST DR	CRYSTAL LAKE IL 60012	white	NHL	m	No	Yes	No	No	8152199359
WILIVALDO PANTOJA	2464	LABORER J	508 FRANCIS ST	JOLIET IL 60432	other	HL	m	No	Yes	No	No	8157194780
	G-0	Sender	V-Vetera	an	J-Jo	urneyman		F-For	eman		A-A	pprentice

N H L- Not Hispanic or Latino

H L- Hispanic or Latino

								1	Nork Cl	assifica	ition						
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
CORY JHAMME RSTEIN	Р	0.00	3.00	0.00	0.00	0.00	0.00	0.00	3.00	0.00	0.00	48.90	0.00	0.00	146.70	1431.11	
	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	14.96		Healt	h	7.25		Vacation	0.00		Training	0.80				
WAYNE RLINDSE Y	Р	0.00	8.00	0.00	0.00	0.00	0.00	0.00	8.00	0.00	0.00	55.10	0.00	0.00	440.80	998.29	
	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	18.60		Healt	h	21.40		Vacation	2.00		Training	2.40				
WILIVAL DO PANTOJA	Р	0.00	3.00	0.00	0.00	0.00	0.00	0.00	3.00	0.00	0.00	47.40	0.00	0.00	142.20	1328.46	
	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	14.96		Healt	h	7.25		Vacation	0.00		Training	0.80				

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

Sep 02, 2022



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CERTIFIED	TRANSCRIPT OF PAYROLL FORM
	PAY PERIOD
Payroll Date	Project Location
7/21/2022 to 7/27/2022	2250 N BROADWAY ST
Contractor Number Or FEIN	CREST HILL IL 60403
370971367	
Project Number or Name	State Capital Funds
Crest Hill	No
Agency	
Not a State Agency	
	Contractor and/or Subcontractor
Company Name	Contractor Location
Williams Brothers Construction	PO BOX 1366
Contact Name	PEORIA IL 61654

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	0								
Primary Phone	Secondary Phone								
3096880416									

Public Body Information								
Public Body Name	Public Body Address							
Crest Hill	2250 N BROADWAY ST							
Contact Name	CREST HILL IL 60403							
0 0 0								
Primary Phone	Secondary Phone							
0	0							

				Employe	e Deta	ils						
Name	Last4SSN	Classificati on	Address	City	Race	Ethnicity	G	V	J	F	A	PhoneNumber
WILIVALDO PANTOJA	2464	LABORER J	508 FRANCIS ST	JOLIET IL 60432	other	HL	m	No	Yes	No	No	8157194780
	G-G	ender	V-Veter	J-Journeyman			F-Foreman			A-Apprentice		

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

	100							1	Nork Cl	assifica	ition						
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
WILIVAL DO PANTOJA	Р	0.00	0.00	0.00	0.00	2.00	0.00	0.00	2.00	0.00	0.00	47.40	0.00	0.00	94.80	1260.54	
	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	14.96		Healt	h	7.25		Vacation	0.00		Training	0.80				

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Sep 02, 2022



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CERTIFIED TRANSCRIPT OF PAYROLL FORM

Payroll Date Project Location 8/4/2022 to 8/10/2022 2250 N BROADWAY ST Contractor Number Or FEIN CREST HILL IL 60403 370971367 Project Number or Name State Capital Funds Crest Hill No Agency Not a State Agency

	Contractor 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	0
Primary Phone	Secondary Phone
3096880416	

	Public Body Information
Public Body Name	Public Body Address
Crest Hill	2250 N BROADWAY ST
Contact Name	CREST HILL IL 60403
000	
Primary Phone	Secondary Phone
0	0

				Employe	e Deta	ils						
Name	Last4SSN	Classificati on	Address	City	Race	Ethnicity	G	V	J	F	A	PhoneNumbe
CORY JHAMMERSTEIN	9830	LABORER J	25953 W SANDY KNOLL DR	CHANNAH ON IL 60410	white	NHL	m	No	Yes	Yes	No	8155572759

G-Gender

V-Veteran

J-Journeyman

F-Foreman

A-Apprentice

N H L- Not Hispanic or Latino

H L- Hispanic or Latino

Work Classification																	
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
CORY JHAMME RSTEIN	Р	0.00	2.00	0.00	0.00	0.00	0.00	0.00	2.00	0.00	0.00	48.90	0.00	0.00	97.80	1501.18	
	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	14.96	^	Healt	h	7.25		Vacation	0.00		Training	0.80				

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

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Sep 02, 2022