

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



Rev. Dec. 2008

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/> FL Crane & Sons, Inc.	ADDRESS 602 South Spring Street Fulton, MS 38843	OMB No.: 1235-0008 Expires: 04/30/2021
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PAYROLL NO. 23	FOR WEEK ENDING 09/04/2022	Week # 23	PROJECT AND LOCATION PONTOTOC CITY SCHOOLS ESSER 2 & 3 (Master Job) 140 EDUCATION DRIVE, Pontotoc, MS 38863	PROJECT OR CONTRACT NO. MS20210045
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(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT OR ST.	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9) NET WAGES PAID FOR WEEK
				Mon	Tue	Wed	Thu	Fri	Sat	Sun				FICA	WITH- HOLDING TAX			OTHER	TOTAL DEDUCTIONS	
				29	30	31	01	02	03	04										
				HOURS WORKED EACH DAY																
RACE ROBERTS ***-**-1778			O								0.00	0.00	459.00							
			S		8	7	7	5			27.00	17.00	459.00	32.35	36.76	14.00		36.08	119.19	339.81
SETH ROBERTS ***-**-6828	1	Carpenter	O								0.00	0.00	553.50							
			S		8	7	7	6			27.00	20.50	611.50	29.86	4.76	12.00		266.25	312.87	298.63
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

(over)

Date 09/07/2022

I, Brittany McGregory payroll
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

FL Crane & Sons, Inc. _____ on the
(Contractor or Subcontractor)

PONTOTOC CITY SCHOOLS ESSER 2 & 3 (Maste; that during the payroll period commencing on the
(Building or Work)

29th day of August, 2022, and ending the 4th day of September, 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

FL Crane & Sons, Inc. _____ from the full
(Contractor or Subcontractor)

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 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

FICA 62.21

FWH 41.52

SWH 26.00

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

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

(4) That:

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



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

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH



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

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

Report # : 23
Job # : MS20210045
Total Hours : 54
Gross This job : 1,012.5

NAME AND TITLE

SIGNATURE

Brittany McGregory payroll
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

Other Deduction Details

FL Crane and Sons

From: 29-AUG-2022 To: 04-SEP-2022

W.E. Selection From: 04-SEP-2022 To: 04-SEP-2022

Description	Amount
RACE ROBERTS	
BEST PLAN - MED - EE	30.73
DENTAL - EE	5.35
Total for RACE ROBERTS	36.08
SETH ROBERTS	
BEST PLAN - MED - Family	197.95
Long Term Disability	10.14
UNUM Critical Care	7.92
Short Term Disability	6.48
401K Deduction	10
UNUM Accident	2.78
United Way	3.7
DENTAL - FAMILY	23.26
Principle Life	4.02
Total for SETH ROBERTS	266.25
Grand Total	302.33