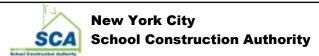
Department of Education

CERTIFICATION OF PAYROLL

OFFICER'S SIGNATURE



Version: 1

NAME X CONTRACTOR SUBCONTRACTOR						ADDRESS											TAX PAYER ID or F.E.I.N							
AMB CONTRACTORS INC						1975 Hempstead Turnpike East Meadow NY 115540000										27-1921637								
PAYROLL NO.		FOR V	VEEK EN	NDING	PROJECT ID							BULDING	3 ID	FEDERA	L GRA	NT NUM	BER		PROJECT NUMBER					
39	4/23/2023				22-026037																			
SCHOOL NAME	scно	OL ADD	RESS								PLA		RFP#					CONTRACT NUMBER						
P.S. 54 - BRONX	2703	WEBST	ER AVENUE, Bronx, NY 10	458							N							C000080244						
EMPLOYEE'S NAME Address, City, State, Zip Social Security Number		S	EE SEND	LIST TRADE & CIRCLE WORK CLASSIFICATION	DAY AND DATE										SUPPLEMENTAL BENEFITS				TOTAL BASE	PREMIUM PORTION	GROSS PAY	TOTAL TAX	NET PAY	
		LEC	JEND			MON	TUE	WED	THU	FRI	SAT	SUN	SUN TOTAL		RATE	To (CIRCLE) Tota		Total	WAGES LESS	OF O.T. & S.T.	121	AND OTHER	FAI	
		1(a)	1(b)		TIME	4/17	4/18	4/19	4/20	4/21	4/22	4/23	HOURS	RATE OF PAY	PER HOUR			Paid	PREMIUM			DEDUCTIONS		
								Hours	s Worked E	ach Dav	<u> </u>													
ZENOVII DZIUBA 1902 E 18 STREET APR#B7 BROOKLYN, NY 11229 388613161		05	М	(Foundation, Concrete, Excavating, Street Pipe Layer and Common) LABORER Journeyman	RT	0.00	0.00	0.00	8.00	8.00	0.00	0.00	16.00	44.0000	50.43	1	II (E) A	806.88	704.00	0.00	1,510.88	367.68	1,143.20	
																- U (E	E C							
LOPEZ ERMILO 237 54 STREET APT # 2 BROOKLYN, NY 11270 114904344		05		(Foundation, Concrete, Excavating, Street Pipe Layer and Common) LABORER Journeyman	RT	0.00	0.00	0.00	8.00	0.00	0.00	0.00	8.00	3.00 44.0000	50.43	٠	U E O	403.44	352.00	0.00	755.44	146.79	608.65	
													•											
LEGEND					WEEKLY TOTAL OF ALL PAGES								24.00		1,210.32 1,056.0					0.00	2,266.32	514.47	1,751.85	
1a-ETHNICITY 01 BLACK 02a HISPANIC 03a ASIAN-PACIFIC 03b ASIAN-INDIAN 04 NATIVE AMERICAN 05 OTHER 05 OTHER	=т	U - IF E - IF	PPLEMENTAL BENEFITS PAID TO UNION (Enter Union Loc PAID TO EMPLOYEE OTHER	I, Aslam Baig, certify that the information contained in this form represents wages and supplemental benefits paid to all persons employed by the above-named firm for work performed on the project named herein during the period(s) indicated above, and that all information provided on the Certified Payrolls and contained in this Summary Report is truthful, complete and accurate. 5/11/2023																				

DATE