C.S. Department of Labor

Wage and Hour Division

NAME OF CONTRACTOR X

PAYROLL NO.

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

U.S. Wage and Hour Division Rev. Dec. 2008

OMB No.: 1235-0008 Expires: 02/28/2018

PROJECT OR CONTRACT NO.

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. ADDRESS OR SUBCONTRACTOR Longhouse Construction LLC

PROJECT AND LOCATION 4518112-8 HCK INT AIRPRT PHIII-1713576

FOR WEEK ENDING

| last | ₹ (3) | (3) | | | (4) | (4) DAY AND DATE | rre. | (9) | (6) Rate | <u>e</u> | | | " | (8) DEDUCTIONS | SNO | | | (6) ta |
|----------------------------------|----------|----------------------|-----|----------|---------|---|--------------|-------|-------------|-----------|------|----------|-------|-------------------|--------|-------|------------|------------------|
| four digits of Social Security 1 | # of | | _ | SUN M | ON T | SUN MON TUE WED THU, FRI SAT | U, FRI SA | - | of Pay | Gross | 1 | | C | 11. | | | | Wage |
| | N/H | W/H Work | Eam | 02/25 02 | 1/26 02 | Eam 02/25 02/26 02/27 02/28 03/01 03/02 03/03 | 01 03/02 03/ | | Total | Amount | # · | P H | | Local D | Deduc- | | T | Paid |
| riumber) or worker | dusc | Cidosilication | 900 | Ĭ | JURS | HOURS WORKED EACH DAY | CH DAY | | UNOH-HOM SI | | FICA | | | | | Other | Deductions | For Week |
| | S1 | Foreman IW | REG | | _ | 8.00 | | 8.(| 8.00 32.00 | 00 256.00 | L | 19.58 32 | 32.26 | 13.14 | 15.36 | | 80.34 | 175.66 |
| Pulaski, NY 13142-4439 | | | | | | | | U. | | 1,184.00 | 00 | | | - | | | Gen | Gender: Male |
| ***_**-3451 | | | | | | 4 | | | | | | | | | | | | |
| | M3 | M3 Foreman IW +2 REG | REG | | | 8.00 | 8.00 | 16.00 | 00 34.00 | 00 544.00 | | 41.62 40 | 40.20 | 27.60 | 32.64 | 1.84 | 143.90 | 400.10 |
| | | | | | 50 | | | | | 1,360.00 | 90 | | | _ | | | | |
| Adams, NY 13605-2549 | | | | | | | | | | | | | - | | | | Gen | Gender: Male |
| ***-**-5982 | | | | | 100 | | | | | | | | _ | | | | | |
| | 200 | S0 2nd Year | REG | | | 8.00 | | 8.00 | 00 17.00 | 00 136.00 | | 10.40 | 11.67 | 3.77 | 8.16 | | 34.00 | 102.00 |
| | ` | Apprentice | | | | | | | | 357.00 | 00 | | | | | | | |
| Scipio Center, NY 13147 | | | | | | | | | | | | | Fi | | | | Gen | Gender: Male |

While comparison of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contractors before contractors performing work or Federally financed or assisted construction may be a subcontractor of the wages paid each employee during the preceding week, *U.S. Department of Labor (DOL) regulators at 25 C; FR. § 5.5(8)(3)(ii) require contractors to submit weekly a copy of all psyrolis to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the psyrolis are correct and contractors 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 to determine that employees have received legally required wages and fininge 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 axisting 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, ESA, U. S. Department of Labor, Room \$3502, 200 Canstitution Avenue, N. W., Vashington, D. C. 20210. SYRACUSE I.W. LOCAL 60 * IRONWORKERS Benefit Fund 14.50 Ed & Training .70

Pension 10.35

RECEIVED

MAR X 8 2018

LeChase Construction

U.S. Department of Labor

Wage and Hour Division

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

Rev. Dec. 2008 Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. OR SUBCONTRACTOR | NAME OF CONTRACTOR X

| 3 | , | | | ADDRESS | co. | | | | | | | | | 2000 |
|--|------|------------------------------|-----------------------|--|---|------------------------|--------------------------|----------|------------|-----------------------|-------------------------|-----------|------------------|--|
| Longhouse Construction LLC | LLC | | | | | | | | | | | | OMB No. | OMB No.: 1235-0008 |
| PAYROLL NO. 2 | | | FOR WEEK ENDING 03/10 | 03/10/2018 | PROJECT AND LOCATION 4518112-8 HCK INT AIRPRT PHIII-1713576 | 4518112-a H(| CK INT AIR | PRT PHII | -1713576 | | PROJECT OR CONTRACT NO. | CONTRACT | y de la constant | 8102/92/20 |
| (1) Name and Individual | (2) | (3) | (4) D | (4) DAY AND DATE | (5) | (6) Rate | 6 | | | DEDUC | (8) DEDUCTIONS | | | (6) |
| four digits of Social Security (W/H) number) of worker | Exm) | W/H Work Exmp Classification | Code | MON 1 UE WED 1HO FRI 03/05/03/06/03/03/08/03/09/ HOURS WORKED EACH DAY | Total Hours | of Pay Non-Hourly*; | Gross Amount Eamed | FICA | W/H Tax | State & Local W/H Tax | Union Deduc- | Other | Tolaf | Wages Paid For Week |
| | S | S1 Foreman IW | REG | 8.00 8.00 | 16.00 | 32.00 | 512.00 | 39.17 | 68.12 | 26.80 | 30.72 | | 16.4 94 | 1 10 |
| Pulaski, NY 13142-4439 | | | | | | | 1,280.00 | | | | | | G. G. | ୍ଷ ଅ |
| | M3 | Foreman (W | REG | 8.00 8.00 | 16.00 | 32.00 | 512.00 | 39.17 | 35.04 | 26.70 | 30.72 | | 104 60 | |
| Syracuse, NY 13211 | | | | | | | 1,216.00 | | | | | | 8.15. R. B. | Race: WHT |
| 4 1 | M3 | M3 Foreman IW +2 REG | REG | 8.00 8.00 | 16.00 | 24 00 | 27 | 64.4 | 20.01 | 100 | | | | |
| Adams, NY 13605-2549 | | | | | | | 1,420.00 | 4 | 40.20 | 27.60 | 32.64 | <u>18</u> | 143 | 90 400.10 Race: WHT Gender: Male |
| | S0 | S0 2nd Year | REG | 8.00 8.00 8.00 | 24.00 | 17.00 | 408.00 | 31.21 | 41.64 | 17.69 | 24.48 | | 144 | |
| Scipio Center, NY 13147 | | Appenace | | | | | 680.00 | | | | 1 | | TIS UZ R | Race: WHT |
| 0007- | | | | | | | | | | | | | | |

While complation of Form WN-427 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts for respond to the information contractors and subcontractors are contracted or assisted construction contracts to the Federal agency contracts to the Federal agency contracting the construction project, accompanied by a signed "Statement of Compliance" indicating bial the psyrolis are correct and complete and that each labover or mechanic has been paid not less than the proper Davis-Bacon provalling wage rate for the work performed. DOL and federal contracting agencies receiving this information review the Information and Information are in Information review the Information review the Information review the Information review the Information and Information and Information are in Information review the Information and In

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 including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, Room S3502, 200 Constitution Avenue, N. W., SYRACUSE I.W. LOCAL 60 * IRONWORKERS Benefit Fund 14.50 Ed & Training .70 Pension 10.35

Department of Labor (n)

Wage and Hour Division

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

U.S. Wage and Hour Digwan Rev. Dec. 2008

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

867.58 287.96 MH WHIT Gender: Male 188 10 Male Gender: Mate Race: WHT Race: BLK Male Male 390,63 For Week 166.74 Race: WHT (9) Net Wages 359.73 1,000,27 Race: WHT Gender: Mafe OMB No.: 1235-0008 Expires: 02/28/2018 Paid Race: Gender: Gender Race Gender 412.02 Deductions 67.90 65,26 64.04 153,37 Total PROJECT OR CONTRACT NO 6.90 4.61 Other 21.12 15,36 76.80 13.92 81.60 32.64 Deduc-(8) DEDUCTIONS Union tions 67.00 12.52 13.78 10.87 68.89 23.59 W/H Tax State & Local PROJECT AND LOCATION 4518112-8 HCK INT AIRPRT PHIII-1713576 170.30 19.18 15.82 100.49 3.47 55.52 Fed W/H Tax 97.92 26.93 19.58 17.75 104.04 41.62 FICA 256.00 352.00 512.00 1,280.00 232.00 680.00 1.280.00 ,280,00 1,160.00 1,360.00 544.00 1,360,00 Amount Earned Gross 0 32.00 32.00 32.00 29.00 34.00 Hours Non-Hourly* 17.00 of Pay (6) Rate 8.00 40.00 11,00 8.00 40.00 32.00 Total (5) 03/11/03/12/03/13/03/14/03/15/03/16 03/17 SUN MON TUE WED THU FRI SAT 8.00 8.00 8.00 8.00 8.00 3.00 8.00 8.00 8.00 HOURS WORKED EACH DAY 8.00 (4) DAY AND DATE 8.00 8.00 03/17/2018 8.00 8.00 8.00 8.00 8.00 8.00 FOR WEEK ENDING Earn Code REG REG REG REG REG REG Journeyman IW Foreman IW +2 Classification OR SUBCONTRACTOR Foreman IW Foreman IW Foreman IW Work 2nd Year Apprentice 3 Exmp # of W/H M3 25 M3 M3 SO (2) 53 Longhouse Construction LLC Identifying number (e.g. last four digits of Social Security Name and Individual 13147 NAME OF CONTRACTOR X Pulaski, NY 13142-4439 4dams, NY 13605-2549 number) of worker 13069-2929 wacuse, NY 13211 cipio Center, NY yracuse, NY -3328 ON TIDBLY Jitton, NY 4397 ~~.5982 11-11-2336 **-3451 7117

White completion of Form WH-347's optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information contractors and subcontractors and subcontractors performing work on Federally financed or assisted construction contracts to "furially weekly a statement with respect to the wages paid each employee during the proceeding week," U.S. Department of Labor (DOL) regulations and subcontractors to submit weekly a copy of all payrolls to the Federal agency contracting the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls to the Federal agency contracting or or financial agency contracting agencial review or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencial review the information to determine that employees have noteined. required wages and finge benefits

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing this borden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, R. confection, including suggestions for reducing this borden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, R. confection, including suggestions for reducing this borden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, R. confection, including suggestions for reducing this borden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, R. confection, including suggestions for reducing this borden, send them to the Administrator, Wage MAR SYRACUSE I.W. LOCAL 60 * IRONWORKERS

Benefit Fund 14.50 Ed & Training 70

Pension 10,35

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Add datasements in the control of

U.S. Department of Labor
Employment Standards Administration
Office of Federal Contract Compliance Programs

|) | | | | | | | | | | | | | | | 2 7 |
|---|--|--|----------------------------------|-------------------|------------|----------------------------|-----------------------|-----------|----------------------|-------------------|----------------|--------------|--|------------------------------|-------------------------------|
| | Federal Funding Agency |) | Total Number of | minorny Employees | L | | | | | | | | Page | 1 of 1 | Form CC-257 Rev. Jan. 1992 |
| OMB No. Expires: | | 10. | Total N | MINIOR | Σ | - | | | Ť | | | - | ď | | |
| Employers I.D. No. OMB No. 26-4399855 Expires: | | 6 | Total Number | or comproyees | Σ | 9 | - | 7 | 9 | - | | 7 | 13. Date Signed | 4/2/2018 | |
| 2. Em | | | 89 | Female | Percentage | | | | | | | | · | | |
| PHIII-1713576 | | | 7. | | Percentage | 15.8 | | 11.8 | 15.8 | | | 11.8 | ne Number | 5-5616 | |
| 1. Covered Area (SMSA or EA) a HCK INT AIRPRT PHIII-1713576 4518112 | | | 6e. American | Native American | ₹ | | | | | | | | 12. Telephone Number | (315) 455-5616 | |
| vered A | struction Road 3211 | S | | | u. | | | | | | | | | | |
| ds - | Longhouse Construction LLC 2101 Brewerton Road Mattydale, NY 13211 | N WORK HOUR | 6d. Asian or | Islander | 2 | | | | | | | | | Owner | |
| in conti | | SUCTIO | | | ш | | | | | | | | | | |
| ort can result actor may be contracts. | Name and Location of Contractor | AL CONSTR | | Hispanic | Σ | | | | | | | | | | |
| e to reporte contraction | Locatio | FEDER | ispani | | ш | | | | | | | | | 2 | |
| c 203. Failun r in part and th assisted cons | Name and | ERAL & NON | 6b. Black (Not of Hispanic | Origin) | Σ | 48 | | 48 | 448 | | | 4 | | | J. |
| Order 11246, Se ended in whole o itracts of federally | Reporting Period From 03/04/2018 To 03/31/2018 | 6. TOTAL FEDERAL & NON-FEDERAL CONSTRUCTION WORK HOURS | 6a. Total All Fmnlovees | by Trade | M | 304 | 10 | 408 | 304 | 104 | | 408 | and Title | ر ا | |
| red by Executive saminated or susp Government con | 4 Reporting Period From 03/04/2018 To 03/31/2018 | | Classifications | | | Journey Worker | Apprentice Trainee | Sub-Total | ırker | | | | rcial's Signature | المحقق المحتسب المحتسب | è |
| This report is required by Executive Order 11246, Sec. 203. Failure to report can result in contracts being cancelled, terminated or suspended in whole or in part and the contractor may be declared inelligible for futher Government contracts of federally assisted construction contracts. | 3 Current Goals Minority Female | 2. | CONSTRUCTION | TRADE | | IRONWORKERS Journey Worker | | | Total Journey Worker | Total Apprentices | Total Trainees | Grand Total | 11. Company Official's Signature and Title | 9, | |

당.S. Department of Labor

Wage and Hour Division

PAYROLL

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

Hey, Dec 2008

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

| NAME OF CONTRACTOR X | OR SUB | OR SUBCONTRACTOR | | | ADDRESS | 92 | | | | | | | | OMB No.: 1235-0008 | 235-0008 |
|----------------------------|---------------------|------------------------|-----------------------|--|--|-----------------------------|---|---------------------------|-----------|-------------------|-----------------------------|-------------------|------------------------|--|---------------------------|
| Longhouse Construction LLC | TIC | | | | | | | | | | | | | Expires: (| 02/28/2018 |
| PAYROLL NO | | | FOR WEEK ENDING | centing 03/24/2018 | | T AND LOCATI | PROJECT AND LOCATION 4518112-A HCK INT AIRPRT PHIII-1713576 | HCK INT AIR | RPRT PHII | 1-1713576 | | PROJECT OR | PROJECT OR CONTRACT NO | ON | |
| (1) Name and Individual | (2) | (3) | | (4) DAY AND DATE | D DATE | (5) | (6) Rate | 8 | | | DEDU | (8) DEDUCTIONS | | | (6) Net |
| last mity | # of W/H Exmp | Work Classification | SU Eam 03/ Code | SUN MON TUE WED THU FRI SAT Eam 03/18 03/19/03/20-03/21 03/22 03/23/03/24 Code HOURS WORKED EACH DAY | D THU FRI 1 03/22 03/23/1 D EACH DAY | SAT 03/24 Total Hours | Š | Gross Amount Earned | FICA | Fed W/H Tax | State & Local W/H Tax | Union Deduc- | Other | Wages Total Paid Deductions For Week | Wages Paid For Week |
| | S | S1 Foreman IW | REG | 8.00 8.00 8.00 8.00 | 00.8 00.8 | 40.00 | 32.00 | 1,280.00 | 97.92 | 170.30 | 00.79 | 76.80 | | 412.02 | 867,98 |
| Pulaski, NY 13142-4439 | | | j | | | | | 1,280.00 | | | | | | Ger . | Race: WHT Gender: Male |
| | 30 | Foreman IW | REG | - | 4.50 | 4.50 | 50 32.00 | 144.00 | 11.02 | 24.47 | 8.87 | 8.64 | | 53.00 | 91.00 |
| | | | | | | | | 1,828.00 | | | | | | ď, | Race: WHT |
| Fulton, NY 13069-4469 | | | | | | | | | | | | | | Ser . | Gender: Male |
| | SS | S5 Journeyman IW REG | REG | 8.00 8.00 8.00 8.00 8.00 | 0 8.00 8.00 | 40.00 | 00 29.00 | 1,160.00 | 88.74 | 79.11 | 54.38 | 09.69 | 34.07 | 325.90 | 834.10 |
| Swaquse NY 13205 | | | | | | | | 1,160.00 | | | | | | F. Gen | Race: BLK Gender: Male |
| 3328 | | | | | | | | | | | | | | | |
| | M3 | M3 Foreman IW +2 REG | REG | 8.00 8.00 8.00 8.00 8.00 | 0 8.00 8.00 | 40.00 | 00 34.00 | 1,360.00 | 104.04 | 100.49 | 68.99 | 81.60 | 4.61 | 359.73 | 1,000 27 |
| Adams NV 13605,2549 | | | | | | | | 1,360.00 | | | | | | Gen R | Race: WHT Gender: Male |
| ***_**-5982 | | | | | | | | | | | | | | | |
| | 20 | S0 2nd Year | REG | 8.00 8.00 8.00 8.00 8.00 | 0 8.00 8.00 | 40.00 | 00/11/00 | 680.00 | 52.02 | 69.40 | 29.48 | 40.80 | | 191.70 | 488.30 |
| | | Apprentice | | | | | | 00.089 | | | | | | ď | Race: WHT |
| Scipio Center, NY 13147 | | | | | | | | | | | | | | Ger | Gender: Male |
| ***-**-2336 | | | | | | | | | | | | | | | |

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 contractors and subcontractors performing work on Federally financed or assisted construction proper. In the Copied and Secretary Secretary with respect to the week secretary or subcontractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction proper, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and reactive and the proper Davis-Bacon proper. Davis-Bacon proper, Doll, and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fininge benefits.

Public Burden Statement

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SYRACUSE I.W. LOCAL 60 * IRONWORKERS Benefit Fund 14.50 Ed & Training .70 Pension 10.35

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)

U.S. Wage and Boar Division, Rev. Dec. 2008

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230.05 172.40 600.17 For Week Race: WHT Race: BLK Race: WHT 195,32 Race: WHT Wages Paid OMB No.: 1235-0008 Expires: 02/28/2018 02/28/2018 (6) Set (9) Deductions: 83.60 88.95 76.68 215.83 Total PROJECT OR CONTRACT NO 98.6 2.77 Other 15.36 19.14 48.96 16.32 Deduc-DEDUCTIONS Union W/H Tax i tions 14.66 11,79 13.54 41.39 State & Local PROJECT AND LOCATION 4518112-a HCK INT AIRPRT PHIIL-1713576 35.12 20.89 60.29 27.76 Fed Tax 19.58 24.40 62.42 20.81 FICA 272.00 256.00 344,00 319.00 1,102.00 816.00 1,360.00 680.00 Earned Amount Gross 0 32.00 29.00 34.00 17.00 Non-Hourly, (6) Rate 8.00 11.00 Eam 03/25 03/26 03/27 03/28 03/29 03/30 03/31 Hours 24.00 16.00 (2) SUN MON TUE WED THU, FRI SAT ADDRESS HOURS WORKED EACH DAY (4) DAY AND DATE 8.00 8.00 8.00 03/31/2018 8.00 3.00 8.00 8.00 8.00 FOR WEEK ENDING Code REG REG REG REG Foreman IW +2 Journeyman IW Classification Foreman IW OR SUBCONTRACTOR Work Apprentice 3 2nd Year Exmp × # Of **M**3 S 25 20 (2) Longhouse Construction LLC Identifying number (e.g. last four digits of Social Security Name and Individual \boxtimes Pulaski, NY 13142-4439 Scipio Center, NY 3147 Adams, NY 13605-2549 number) of worker Syracuse, NY 13205 NAME OF CONTRACTOR 50 ***.**-3328 ***-**-2336 PAYROLL NO ***, **-5982 ***-**-3451

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 in respond to the information collection contractors and subcontractors and subcontractors of Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each entropyee during the preceding week." U.S. Oppartment of Labor (DOL) resolutions at 29 C.F.R. § 5.5(a)(3)(a) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting the construction project, accompanied by a signed "disciplination in determining that the physicial are correct and lederal contracting agencies receiving this information review the information to determine that employees have received equally required wages and throw wages and throw benefits.

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Pension 10 35