APPLICATION FOR PAYMENT

CAP702 Page: 1 of 2

To: University City, City of 6801 Delmar Blvd University City, MO 63130		PROJECT: RUTH PARK RUTH PARK	Application No.: Application Date: Period To: Contract Date: 6 OCT 18,2016 OCT 18,2016 MAR 18,2016 Project Nos:
From Contractor: Munie Greencare Professionals 1000 Milburn School Road Caseyville, IL 62232		VIA ARCHITECT:	Distribution List: Owner Construction Mgr Architect Field Contractor Other
		CONTRACT FOR:	
Contractor's Application is made for payment as sho	cation for P	ayment hed Continuation Sheet.	CONTRACTOR'S CERTIFICATION: The Contractor's signature here certifies that, to the best of their knowledge,
 Original Contract Amount: Net of Change Orders: 	\$_ \$	346,753.99 -9,664.35	this document accurately reflects the work completed in this Application for Payment. The Contractor also certifies that all payments have been made
Net Amount of Contract:	\$ \$	337,089.64	for work on previous Applications for Payment and also that the Current Payment is Due.
4. Total Completed & Stored to	Date: \$_	329,808.75	(Authorizing Signature) Court Munic Greencare Professionals
 Retainage Summary: a. 0.00 % of Complete b. 0.00 % of Stored Ma 		0.00	Date: OCT 18,2016 State Authorized: Illinois County of: St. Clair Subscribed and sworn to before OFFICIAL SEAL TERESA A COLEMAN Notary Public - State of Illinois My Commission Expires Jun 14, 2019
Total Retainage:	\$	0.00	me this 18 day of Oloper Olo
6. Total Completed Less Retain	nage: \$	329,808.75	Notary Public Storage Commission expires: 6-14-19
7. Less Previous Applications:	\$	299,485.05	ARCHITECT'S CERTIFICATION:
8. Current Payment Due, This	Application: \$	30,323.70	The Architect's signature here certifies that, based on their own observations, the Contract Documents and the information contained herein, this document
9. Contract Balance (Including	Retainage): \$	7,280.89	accurately reflects the work completed in this Application for Payment. The Architect also certifies the Contractor is entitled to the amount certified
CHANGE ORDER Activity	Additions	Subtractions	for payment.
Total previously approved:	6,635.15	-16,299.50	AMOUNT CERTIFIED:
Total approved this Month:	0.00	0.00	AMOUNT CENTIFIED.
Sub Totals:	6,635.15	-16,299.50	Date:
NET of Change Orders:	-9 664 3	85	(Architects Signature)

APPLICATION FOR PAYMENT - CONTINUATION SHEET

CAP703

Page 2 of 2 Pages

From:

Munie Greencare Professionals 1000 Milburn School Road Caseyville, IL 62232 <u>To:</u>

University City, City of 6801 Delmar Blvd University City, MO 63130 Project:

RUTH PARK RUTH PARK Application No: 6

Application Date: 10/18/2016

Period To: 10/18/2016 Contract Date: 3/18/2016

Architects Project#:

Α	В	С	D Work Cor	moleted E	F Materials	G Total Completed		H	· AMERICAN CONTROL CON
Item No	Description of Work	Contract Value	From Previous Application (D + E)	This Period	Presently Stored (Not In D or E)	and Stored To Date (D+E+F)	% (G / C)	Balance To Finish (C - G)	Retainage (If Variable Rate)
1	Mobilization, Staking, & Swpp	13,612.00	13,612.00	0.00	0.00	13,612.00	100	0.00	0.00
2	Site Grading/Berm Construction	30,680.00	30,680.00	0.00	0.00	30,680.00	100	0.00	0.00
3	Irrigation - Berm	7,680.00	7,680.00	0.00	0.00	7,680.00	100	0.00	0.00
4	Irrigation - Driving Range	72,395.00	68,775.25	0.00	0.00	68,775.25	95	3,619.75	0.00
5	Landscaping	49,983.15	24,991.58	24,991.57	0.00	49,983.15	100	0.00	0.00
6	Drainage	12,497.00	12,497.00	0.00	0.00	12,497.00	100	0.00	0.00
7	Sod - Zoysia	73,222.80	69,561.66	0.00	0.00	69,561.66	95	3,661.14	0.00
8	Sod - Fescue	47,739.69	45,352.71	2,386.98	0.00	47,739.69	100	0.00	0.00
9	Retaining Wall	35,520.00	35,520.00	0.00	0.00	35,520.00	100	0.00	0.00
10	Amended Soil	3,424.35	3,424.35	0.00	0.00	3,424.35	100	0.00	0.00
11	CO#1Remove mulch bed	12,875.15-	12,875.15-	0.00	0.00	12,875.15-	100	0.00	0.00
	Reduce Landscaping								
12	CO#2 Remove Amended Soil	3,424.35-	3,424.35-	0.00	0.00	3,424.35-	100	0.00	0.00
13	CO#3 Correct EvergreenQuantity	3,690.00	3,690.00	0.00	0.00	3,690.00	100	0.00	0.00
14	CO#4 Add Mulch Install To Berm	2,945.15	0.00	2,945.15	0.00	2,945.15	100	0.00	0.00
		337,089.64	299,485.05	30,323.70	0.00	329,808.75	98	7,280.89	0.00

PAYROLL



Rev. Dec. 200

Wage and Hour Division

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

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													No: 1235-008						
		are Professiona	ls.	inc.							Case	yville, IL	62234						res: 1/31/2015
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			ρι	2111170						University	City, I	MO							
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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 contractor contractors performing work on Federally financed or assisted construction contracts to respond to the information collection contractors performing work on Federally financed or assisted construction contracts to respond to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. §3.1(a)(3)(i) 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 is 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 reviewing this burden, send them to the Administrator, Wage and Hour Division, ESA, U.S. Department of Lebor, Room S3502, 200 Constitution Average, N.W. Washington, D.C. 20210

Date September 26, 2016		(b) WHERE FRINGE BENEFITS ARE PAID	IN CASH PREVAILING WAGE
ı, Erika Wright	Contract Administrator	— Each laborer or mechanic	listed in the above referenced payroll has
(Name of Signatory Party)	(Title)		n the payroll, an amount not less than the sum urly wage rate plus the amount of the required
do hereby state:			the contract, except as noted in Section 4(c)
(1) That I pay or supervise the payment of	the persons employed by	(c) EXCEPTIONS	,
Munie Greenca	re Professionals on the	CVOEDTION (ODATE	
(Contractor or	Subcontractor)	EXCEPTION (CRAFT)	EXPLANATION
Ruth Park Range and Berm (Building or Work)	; that during the payroll period commencing on the		
all persons employed on said project have be have been or will be made either directly or it	een paid the full weekly wages earned, that no rebates	1	
Munie Greencar			
•	t no deductions have been made either directly or		
Regulations, Part 3 (29 CFR Subtitle A), issu	person, other than permissible deductions as defined in ed by the Secretary of Labor under the Copeland Act, as at 967-76 Stat 357-40 U.S.C. 276c\ and described		
(Z) That any payrolls otherwise finder I	his contract required to be submitted for the above		
period are correct and complete; that the wag not less than the applicable wage rates conta contract; that the classifications set forth ther (3) That any apprentices employed in t	pe rates for laborers or mechanics contained therein are ined in any wage determination Incorporated into the ein for each laborer or mechanic conform with the work the above period are duly registered in a bona fide	REMARKS: Other Deductions inclu	de
apprenticeship program registered with a Sta	te apprenticeship agency recognized by the Bureau of		
Apprenticeship and Training, United States D exists in a State, are registered with the Bure	epartment of Labor, of if no such recognized agency au of Apprenticeship and Training, United States		
(4) That:	au of Applienticeshid and Training, United States UNION WAGE	NAME AND TITLE SI	GNATURE
	RE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	Erika Wright	$() \cap ()$
in addition to the basic h	ourly wage rates paid to each laborer or mechanic listed	Contract Administrator	MILLE
contract have been or wi	payroll, payments of fringe benefits as listed in the Il be made to appropriate programs for the benefit of as noted in Section 4(c) below.	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUT 231 OF TITLE 31 OF THE UNITED STATES CODE.	

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



Rev. Dec. 200

Wage and Hour Division

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

NAME OF CONTRACTOR	OR SUE	CONTACTOR								*************	ADDRESS	1000	Milburn	School F	Road				OM	B No: 1235-008		
	Greend	are Professiona										Case	yville, IL	62234					Exp	ires: 1/31/2015		
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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 contractors performing work on Federally financed or assisted construction contracts to respond to the information collection contractors 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. §5.3.(a)(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 agened "Statement of Compliance" indicating that the payrolls are correct 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 agend as receiving this information revew the information to determine that employees have received legally required wages and fining benefits.

Public Burden Statement

We estimate that is 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 baden, send them to the Administrator, Wage and Hour Division, ESA, U.S. Department of Labor, Room 53502, 200 Constitution Average, N.W. Washington, D.C. 20210

Date September 30, 2016		(b) WHERE FRINGE BENEFITS ARE PAID IN CASH PREVAILING WAG
ı, Erika Wright	Contract Administrator	Each laborer or mechanic listed in the above referenced payroll has
(Name of Signatory Party)	(Title)	been paid, as indicated on the payroll, an amount not less than the sun
do hereby state:	• •	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)
(1) That I pay or supervise the payment of the	e persons employed by	(c) EXCEPTIONS
Munie Greencare	Professionals on	the
(Contractor or Su	ubcontractor)	EXCEPTION (CRAFT) EXPLANATION
Ruth Park Range and Berm (Building or Work)	; that during the payroll period commencing on	the
17 day of September, and ending all persons employed on said project have been have been or will be made either directly or ind	n paid the full weekly wages earned, that no rebates	
Munie Greencare (Contractor or Su		full
amended I48 Stat 948 63 Start 108 72 Stat	by the Secretary of Labor under the Copeland Act, 967: 76 Stat 357: 40 H S C 276c) and described	
(Z) That any payrolls otherwise under this	s contract required to be submitted for the above	
period are correct and complete; that the wage not less than the applicable wage rates contains contract; that the classifications set forth therein	rates for laborers or mechanics contained therein ar ed in any wage determination Incorporated into the n for each laborer or mechanic conform with the work	
apprenticeship program registered with a State		
(a) WHERE FRINGE BENEFITS ARE in addition to the basic hou in the above referenced pa contract have been or will be	UNION WAR PAID TO APPROVED PLANS, FUNDS, OR PROGRAM If y wage rates paid to each laborer or mechanic liste yroll, payments of fringe benefits as listed in the pe made to appropriate programs for the benefit of s noted in Section 4(c) below.	is Erika Wright

PAYROLL



Wage and Hour Division (For Contractor's Optional Use; See Instructions at www.dol.gov/esa/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. 200 ADDRESS 1000 Milburn School Road OMB No: 1235-008 NAME OF CONTRACTOR [7] OR SUBCONTACTOR | Caseyville, IL 62234 Munie Greençare Professionals, Inc. Expires: 1/31/2015 FOR WEEK ENDING PROJECT AND LOCATION PROJECT OR CONTRACT NO. PAYROLL NO. Ruth Park Range & Berm. 23 September 30, 2016 Ruth Park Range and Berm University City, MO (1) (3) (4) DAY AND DATE (2)(8) (7) (9) **DEDUCTIONS** М Tu W Th S Su GROSS FED WITH ST WITH **NET WAGES** NAME AND INDIVIDUAL IDENTIFYING NUMBER 9/24 9/25 9/26 9/27 9/28 9/29 (e.g. LAST FOUR DIGITS OF SOCIAL SECURITY) WORK TOTAL RATE AMOUNT HOLDING HOLDING MISC PAID FOR NUMBER) OF WORKER CLASSIFICATION HOURS WORKED EACH DAY HOURS OF PAY **EARNED** TAX SS MED TAX DED DEDUCTIONS WEEK 2485.89 Francisco Javier 10.50 10.50 66.89 Arrambide Narvaez 3 LABORER 000-00-0814 9.50 14.00 40.00 44.59 **/**2873.22 456,14 178.14 41.66 146,79 17.84 840.57 2032.65 Armando Barragan Pena 178.36 000-00-8416 0.00 89.18 3 LABORER 4.00 99.27 4.00 44.59 670.26 27.22 41.55 9.72 19.00 1.78 570.99 Patrick Shawn Cox 100.33 000-00-1761 0.00 66.89 0 LABORER 2.25 2.25 44.59 885.65 51.93 47.27 11.05 44.84 256.86 411.95 473.70 Manuel Diaz Elias 000-00-1686 0.00 66.89 LABORER 7.50 44.59 1036.44 65.30 63.87 14.94 34.94 83.59 262 64 773.80 7.50 512.79 Hector Mario Gutierrez Juarez 66.89 000-00-8882 0.00 2 LABORER 4,00 7,50 44.59 1249.25 77.45 18.11 44.70 5.13 326.62 922.63 11.50 181.23 Daniel Rodney Hocher 412.46 000-00-4545 0.00 66.89 0 **LABORER** 9.25 44.59 9.25 1277.03 160.74 79.17 18.52 34.42 4.12 296.97 980.06 Bradley P Leopard 111.48 000-00-6219 0.00 66.89 3 LABORER 2.50 417.48 16.80 3.93 213.72 203.76 2.50 44.59 0.00 1.00 191.99 Jose Antonio Perez Rodriguez 334.43 000-00-7603 0.00 66.89 5 LABORER

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 performing work on Federally financed or assisted construction contracts to respect to the wages paid each employee during the preceding week. "U.S. Department of Labor (COL) regulations at 29 C.F.R. §5 %(x)(3)(i) require contractors to submit weekly a copy of all psyrolls 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 agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct 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 the sinformation rower to inform attent to determine that employees have received legally required wages and finance.

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Public Burden Statement

We estimate that is will take an average of 35 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 builden, send them to the Administrator, Wage and Hour Division, ESA, U.S. Department of Labor, Room S3502, 200 Constitution Average, N.W. Wathington, D.C. 2021b.

Mathington, D.C. 2021b.

Date October 7, 2016 t. Erika Wright (Name of Signatory Party)		dministrator itte)	- Each laborer or m been paid, as ind of the applicable.	(b) WHERE FRINGE BENEFITS ARE PAID IN CASH PREVAILING WAG - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sur of the applicable basic hourly wage rate plus the amount of the require fringe benefits as listed in the contract, except as noted in Section 4(c)							
do hereby state:			(c) EXCEPTIONS								
(1) That I pay or supervise the payment of the person Munie Greencare Prof	ons employed by fessionals	on the		EXPLANATION							
(Contractor or Subcontr			EXCEPTION (CRAFT)	#* V = V = V = V = V = V = V = V = V = V							
Ruth Park Range and Berm		period commencing on the									
(Building or Work)	•										
24 day of September, and ending the	30 day of	September									
all persons employed on said project have been paid have been or will be made either directly or indirectly	the full weekly wages e	arned, that no rebates									
Munie Greencare Pro	fessionals	from the full									
(Contractor or Subconti											
weekly wages earned by any person and that no dec indirectly from the full wages earned by any person, Regulations, Part 3 (29 CFR Subtitle A), issued by the amended (48 Stat. 948, 63 Start. 108, 72 Stat. 967).	other than permissible of he Secretary of Labor uni	der the Copeland Act, as	with the state of								
(2) That any payrolls otherwise under this con- period are correct and complete; that the wage rates not less than the applicable wage rates contained in contract; that the classifications set forth therein for	s for laborers or mechani any wage determination	cs contained therein are Incorporated into the	REMARKS: Other Deduction	ns include							
(3) That any apprentices employed in the abore apprenticeship program registered with a State apprenticeship and Training, United States Department of Apprenticeship and Training, United Stateship and Training, United Stateship and Training, United Stateship and Training, United	renticeship agency recognent of Labor, of if no suc Apprenticeship and Traini	ch recognized agency ing. United States UNION WAGE 5, FUNDS, OR PROGRAMS	NAME AND TITLE Erika Wright Contract Administrator	SIGNATURE (1) LICE							
in the above referenced payrol contract have been or will be n such employees, except as no	I, payments of fringe ben nade to appropriate prog	efits as listed in the rams for the benefit of		THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION CODE.							

PAYROLL



Rev. Dec. 200

Wage and Hour Division

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

			Per	rsons a	are noi	t requi	red to	respo	ond to i	he col	lection of inform	ation unle	ss it displays a	currently vali	d OMB control	number.				Rev. Dec. 200
NAME OF CONTRACTOR	OR SUB	CONTACTOR									ADDRESS	1000	Milburn (School F	Road				OME	3 No: 1235-008
Munie Outdoor Services,	Inc. DI	BA Munie Greer	nca	are P	rofe	ssic	nak	s, In	IC.			Case	ville, IL	62234					Exp	ires: 1/31/2015
PAYROLL NO.			FO	R WE	EK E	NDIN	IG				PROJECT A	ND LOC	ATION				PROJECT	OR CON	TRACT NO.	
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(1)	(2)	(3)	Τ		(4) DA'	Y AN	D DA	\TE		(5)	(6)	(7)		-	((8)		"	(9)
	≅ Ş		1S.	Su	М	Tu	W	Th	F	s						DEDU	CTIONS			•
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g. LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	7. OF THHOLD	WORK	OT O	\vdash			<u> </u>	•	9/29	•	I IOIAL	RATE	GROSS AMOUNT	FED WITH HOLDING TAX	ss	MED	ST WITH HOLDING TAX	MISC DED	TOTAL DEDUCTIONS	NET WAGES PAID FOR WEEK
NUMBER) OF WORKER Alejandro Regalado Vazquez	<u>გგიე</u>	CLASSIFICATION	╁-		HOUL	KS WC)RKE	D EAG	CH DA'	Y T	HOURS	OF PAY	EARNED 334.43 /	120	33	IVIEL	1//	DED	DEDOCTIONS	VVCCIN
000-00-3859	2	LABORER	٥						—		0.00	66.89	00 4.10							
			s							7.50	7.50		1124.39	150.02	69.72	16.30	36.90	3.34	276.28	848.11
Aron Bradley Schneider 000-00-8163	2	LABORER	0			4.00					4.00	66.89	2051.14		ĺ					
		DABONEN	s			4.00	8.50	9.5	10.50	7.50	40.00		2414.94	484.79	149.34	34.93	120.97	24.04	814.07	1600.87
			0								0.00	F	0.00							
		LABORER	s								0.00								0.00	0.00
			0					T			0.00		0.00			.,				
		LABORER	s					T	<u> </u>	<u> </u>	0.00								0.00	0.00
			╀	-		_	┢	+	+-	-	0.00		0.00						0.00	0.00
		LABORER	L				_		<u>_</u>	<u> </u>	0.00	0.00								
			s					<u> </u>			0.00								0.00	0.00
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	WHO CHARLES		s					T			0.00								0.00	0.00
			6					†	\dagger				0.00						7.00	
	~		s				<u> </u>	 	+		0.00						CORPORATION CONTRACTOR		0.00	0.00

While completion of Form WH-347 is optional, it is mandetory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respect to the information collection contractor performing work on Federally financed or assisted construction contracts to respect to the wages paid each employee during the preceding week. "U.S. Department of Labor (DOL) regulations at 29 C.F.R. §5.1(a)(S)(ii) require contractors to admitt weekly a copy of all payedles to the deep contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payodles of the order of mid-cating payed in the project Davis Bason prevailing wage rate for the work performed. DOL and federal combacting 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 is 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 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. Washington, D.C. 20210

Date October 7, 2016 I. Erika Wright (Name of Signatory Party)	Contract Administrator (Title)	been paid, as indicated on the	PREVAILING WAGE and in the above referenced payroll has a payroll, an amount not less than the sum age rate plus the amount of the required contract, except as noted in Section 4(c)
do hereby state:		(c) EXCEPTIONS	
(1) That I pay or supervise the payment of the	e persons employed by Professionals on the		EXPLANATION
Munie Greencare (Contractor or S		EXCEPTION (CRAFT)	CAP EAGATION
·	; that during the payroll period commencing on the		
Ruth Park Range and Berm (Building or Work)	, that daming the popularity		
24 day of September and end	ing the 30 day of September		
all persons employed on said project have be have been or will be made either directly or in	en paid the full weekly wages earned, that no rebates		
Munie Greencar	e Professionals from the full		
(Contractor or S	ubcontractor)		
indirectly from the full wages earned by any p	no deductions have been made either directly or erson, other than permissible deductions as defined in ed by the Secretary of Labor under the Copeland Act, as 1 967: 76 Stat 357: 40 H S C 276c) and described		
(2) That any payrolls otherwise under	his contract required to be submitted for the above	REMARKS: Other Deductions include	3
not lose than the applicable wage rates conta	ge rates for laborers or mechanics contained therein are lined in any wage determination Incorporated into the ein for each laborer or mechanic conform with the work		
apprenticeship program registered with a Sta	the above period are duly registered in a bona fide te apprenticeship agency recognized by the Bureau of separtment of Labor, of if no such recognized agency		
exists in a State, are registered with the Bure	eau of Apprenticeship and Training, United States UNION WAGE	NAME AND TITLE SIGN	NATURE
(a) WHERE FRINGE BENEFITS	ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	Contract Administrator	i talice
in the above referenced contract have been or v	nourly wage rates paid to each laborer or mechanic listed payroll, payments of fringe benefits as listed in the vill be made to appropriate programs for the benefit of t as noted in Section 4(c) below.	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE ST SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTIO 231 OF TITLE 31 OF THE UNITED STATES CODE.	TATEMENTS MAY SUBJECT THE CONTRACTOR OR IN, SEE SECTION 1001 OF TITLE 18 AND SECTION

PAYROLL

Wage and Hour Division

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

		i	Person	ns are i	not requi	red to	respond	to the	collect	tion of informati	on unless i	t displays a cu	rrently valid Ol	MB control nur	nber.			Re	v. Dec. 2008	
NAME OF CONTRACTOR	OR SUBC	ONTACTOR 🗸								ADDRESS	1000	Milburn S	School R	oad				ОМІ	3 No: 1235-008	
Munie [,]	Greenc	are Professiona									Case	yville, lL	62234						oires: 1/31/2015	
PAYROLL NO.			FOR	WEE	K END	NG				PROJECT A				·		PROJECT	OR CON	TRACT NO.		
	24	•	Octo	ober	7, 20	16				Ruth Park Range & Berm, University City, MO							h Park	Park Range and Berm		
(1)	(2)	(3)	J.S.	T		-T	ND DA	T	ſ	(5)	(6)	(7)	TO THE PERSON NAMED IN COLUMN TO THE			8) CTIONS			(9)	
	SNO		IO H	-	Su M	+		' 				GROSS	FED WITH I	T T	DLDO	STWITH		1	NET WAGES	
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g. LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHOLDING EXEMPTIONS	WORK CLASSIFICATION	ō		10/2 10/ 10URS V			·		TOTAL HOURS	RATE OF PAY	AMOUNT EARNED	HOLDING TAX	ss	MED	HOLDING TAX	MISC DED	TOTAL DEDUCTIONS	PAID FOR WEEK	
Francisco Javier Arrambide Narvaez			0		0.8	20	П					356.72								
000-00-0814	3	LABORER	H			_		<u> </u>		0.00	66.89					·				
			s		8.0	20				8.00	44.59	Z	105.94	75.84	17.73	46.82	3.57	249.90	973.33	
Aron Bradley Schneider 000-00-8163	_	(400050	0		0.0	00				0.00	66.89	356.72								
	2	LABORER	s		8.0	00				8.00			101.19	57.61	13.47	35.15	9.79	217.21	718.11	
Claude Richard Adams 000-00-1342			0		0,0	00				0.00		356.72								
000-00-1342	2	LABORER	s		8.0	20														
			Ĭ			_	-			8.00		957.97	108.41	59.39	13.89	32.79	0.00	214.48	743.49	
			0							0.00	0.00	0.00	9000							
			s							0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
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			0			T				0.00		0.00	3.20		2.20	3.30	2.30	5.00	2.00	
	A COLUMN TO THE PARTY OF THE PA		s							0.00		0.00	0.00	0.00	0.00	0-00	0.00	0.00	0.00	

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)(i) 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" incicating 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 legalty required wages and frings benefits.

Public Burden Statement

We estimate that is 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 barden, send them to the Admirastrator, Wage and Hour Division, ESA, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date October 14, 2016 I. Erika Wright (Name of Signatory Party)	Contract Adı		paid, as indica applicable basi	S ARE PAID IN CASH PREVAILING WAGE or mechanic listed in the above referenced payroll has been ted on the payroll, an amount not less than the sum of the ic hourly wage rate plus the amount of the required fringe ed in the contract, except as noted in Section 4(c) below.
do hereby state:				ad in the contract, except as noted in Section 4(c) below.
(1) That I pay or supervise the payment of the person			(c) EXCEPTIONS	
Munie Greencare Pro		on the	EXCEPTION (CRAFT)	EXPLANATION
(Contractor or Subcont	•			
Ruth Park Range and Berm (Building or Work)	; that during the payroll po			
1 day of October, and ending the	· <u>7</u>	October		
all persons employed on said project have been paid been or will be made either directly or indirectly to or	I the full weekly wages earne on behalf of said	d, that no rebates have	***	
Munie Greencare Pro	ofessionals	from the full		
(Contractor or Subcont	tractor)			
Part 3 (29 CFR Subtille A), issued by the Secretary of Stat. 948. 63 Start. 108. 72 Stat. 967: 76 Stat. 357: 4	0 U.S.C. 276c). and describe	ed below:	-	
(2) That any payrolls otherwise under this cont are correct and complete; that the wage rates for lab- than the applicable wage rates contained in any wage the classifications set forth therein for each laborer o	orers or mechanics contained e determination Incorporated r mechanic conform with the	d therein are not less I into the contract; that work he performed.	REMARKS: Other Deduction	ons include
(3) That any apprentices employed in the above apprenticeship program registered with a State appre	enticeship agency recognized	d by the Bureau of		
Apprenticeship and Training, United States Department in a State, are registered with the Bureau of Apprentic	ent of Labor, of it no such fed ceship and Training, United S	States Department of	ALALET AND TITLE	Josephine
(4) That: (a) WHERE FRINGE BENEFITS ARE PAIL	N TO APPROVED PLANS FUR	UNION WAGE NDS. OR PROGRAMS	NAME AND TITLE Erika Wright	SIGNATURE
in addition to the basic hourly w			Contract Administrator	(I) I do I to
the above referenced payroll,	ayments of fringe benefits as opropriate programs for the b	listed in the contract	THE WILLFUL FALSIFICATION OF ANY OF	THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR L PROSECUTION, SEE SECTION 1001 OF TITLE 18 AND SECTION 231 DE.