## 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 OR SUBCONTRACTOR Rainbow Inc.						ADDRESS 7324 36th Avenue North Minneapolis, MN 55427								OMB No.: Expires:					
PAYROLL NO.			FOR	WEEK ENDII		07/13/2024		PROJE	ECT AND	LOCATION	2423681-C I	REISS DOC	K			PROJECT OR 23-17		ſ NO.	
(1) Name and Individual	(2)	(3)	(4) DAY AND DAT				Rate		Rate	(7)	(8) DEDUCTIONS						(9) Net		
Identifying number (e.g. last four digits of Social Security number) of worker			Earn Code	07/07 07	7/08	TUE WED 07/09 07/10 S WORKED	07/1	1 07/1	2 07/13		of Pay	Gross Amount Earned	FICA	Fed W/H Tax	State & Local W/H Tax	Union Deduc- tions	Other	Total Deductions	Wages Paid For Wee
BITZAN, ZACHARY R	S2	LABORER FM	REG	2	2.00					2.00	51.50	103.00	7.88	19.57	6.75	6.00		40.20	62.8
8633 COUNTY ROAD 7 BRANDON, MN 56315 ***_**-8104								•				4,691.25							
ELMER, JASON L	M2	PAINTER	ОТ	3	3.50	3.00				6.50	73.50	1,653.75	118.98	223.39	87.91	133.29		563.57	1,090.1
8411 WHISKEY LAKE DR N BRANDON, MN 56315 ***-**-7769		INDUSTRIAL - FOREMAN	REG	8	3.00	8.00 8.00				24.00	49.00	4,616.00							
SHEPERSKY, BRANDON D	S3	PAINTER	ОТ		.00					1.00	68.25	432.25 32.04	67.97	24.12	34.83		158.96	273.2	
12514 FREEDOM DRIVE MENAHGA, MN 56464 ***-**-9264		INDUSTRIAL	REG	8	3.00				1	8.00	45.50	3,414.75				-			
VICTORIA, PABLO A	M2	INDUCTORS I	ОТ	] ] 3	3.50	3.00				6.50	68.25	1,535.63 11 3,107.25	117.47	117.47 170.16	79.22	118.04		484.89	1,050.7
8604 DAVENPORT ST NE BLAINE, MN 55449 ***-**-8473			REG	3	3.00	8.00 8.00				24.00	45.50								
Mile completion of Form M/H 247 I	c ontion	at it is mandatory for co	warad c	ontractors an	ort subv	contractors parti	nrmino	work on	Federall	v financed or	assisted constru	ction contracts	o respond to	the informati	on collection c	ontained in 29	CFR 883	3, 5,5(a). The Co	oeland

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 represent a statement with respect to the wages paid each employee during heep receding 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 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, ESA, U. S. Department of Labor, Room S3502, 200 Constitution Avenue, N. W., Washington, D. C. 20210.

## Page 1 of 1

# Rainbow Inc. Payroll Certification Report 2423681-C REISS DOCK 07/07/24 To 07/13/24

Employee	Trade	HEALTH	PENSION	TRAINING	OTHER	Total
1483 - BITZAN, ZACHARY R	LABORER FM	10.150	11.170	0.420	0.120	21.860
1126 - ELMER, JASON L	PAINTER INDUSTRIAL -	10.750	16.050	1.160	0.110	28.070
1634 - SHEPERSKY, BRANDON D	PAINTER INDUSTRIAL	10.750	16.050	1.160	0.110	28.070
1525 - VICTORIA, PABLO A	PAINTER INDUSTRIAL	10.750	16.050	1.160	0.110	28.070

Date 07/17/24		(b) WHERE FRINGE BENEFITS ARE	E PAID IN CASH
I, Andrea Peine	Payroll Administrator	`,	
(Name of signatory party)	(Title)	as indicated on the payroll, an a	in the above referenced payroll has been paid, mount not less than the sum of the applicable amount of the required fringe benefits as listed
do hereby state:		in the contract, except as noted	in Section 4 (c) below.
(1) That I pay or supervise	payment of the persons employed by	(c) EXCEPTIONS	
	Rainbow Inc.	on the	
	(Contractor or Subcontractor)	EVALUETION (ADALT)	EVELANATION
C REISS DO	CK ; that during the payroll period commencin	g on the EXCEPTION (CRAFT)	EXPLANATION
(Building			
	2024 , and ending the 13th day of July 2024 ,		
	d project have been paid the full weekly wages earned, that no rebates directly or indirectly to or on behalf of said	have	
	Rainbow Inc. from	the full	
	(Contractor or Subcontractor)		
from the full wages earned to	y person and that no deductions have been made either directly or indir by any person, other than permissible deductions as defined in Regulati	ons,	
Part 3 (29 CFR Subtitle A), i Stat. 948, 63 Stat. 108, 72 S	ssued by the Secretary of Labor under the Copeland Act, as amended (Stat. 967; 76 Stat. 357; 40 U.S.C. 3145), and described below:	48	
FICA, Medicare, Federal/Sta	ate Withholding Taxes, Dues, Vacation		
are correct and complete; the than the applicable wage rathe classifications set forth to	herwise under this contract required to be submitted for the above perional the wage rates for laborers or mechanics contained therein are not lead to the contained in any wage determination incorporated into the contract; therein for each laborer or mechanic conform with the work he performent	ess that d.	
ticeship program registered ticeship and Training. United	s employed in the above period are duly registered in a bona fide appre with a State apprenticeship agency recognized by the Bureau of Apprei d States Department of Labor, or if no such recognized agency exists in e Bureau of Apprenticeship and Training, United States Department of I	n- a	
(4) That:		NAME AND TITLE	SIGNATURE
	E BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGF	Andrea Peine	1 1 (Pours)
χ In addition to	the basic hourly wage rates paid to each laborer or mechanic listed in ferenced payroll, payments of fringe benefits as listed in the contract	Payroll Administrator	SIGNATURE An ches Chevin
have been o	r will be made to appropriate programs for the benefit of such except as noted in Section 4(c) below.	THE WILLFUL FALSIFICATION OF ANY OF THE ABI SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSE TITLE 31 OF THE UNITED STATES CODE.	OVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR ECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF

Molly Musolf, Project Administrator Molly Musolf 7/19/24