

COMPLIANCE STATEMENT TO ACCOMPANY CONTRACTOR'S WEEKLY PAYROLL

Wisconsin Department of Transportation

DT1816 8/2006 (Replaces EC673)

The willful falsification of any of the statements on this form 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.

Submit one copy to Regional Office

Adapted from U.S. Department of Labor Form WH-348(1)(68).

No. 1	State Project ID 5557010-78	Federal Project ID M Jolma Inc. Superior E 5 th St.	County Douglas	Payroll Period 10/05/2025- 10/11/2025
Contractor or Subcontractor Monarch Paving Company, Division of Mathy Construction, Inc.				
Authorized Agent Name Anna Jaeger			Authorized Agent Title Payroll Clerk	

I, the undersigned, do state that:

- I pay, or supervise the payment of the persons employed by the above contractor or subcontractor on the above project. During the payroll period designated above all persons employed on said project have been paid the full weekly wages earned, except as noted in Section 1(a) below. No rebates have been or will be made either directly to or indirectly on behalf of said contractor or subcontractor from the full weekly wages earned by any person. No deductions have been made directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR 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. 276c), and described below in Section 1(b).

(a) Exceptions	Name	Craft	Explanation	When will this person be paid?
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(b) **Description of Deductions**

Federal and State Withholding Taxes, FICA, Medicare, Union Dues, Uniform Charges (when applicable), Court Ordered Deductions

- Any payrolls otherwise under this contract required to be submitted for the above period are correct and complete. The wage rates for laborers or mechanics contained are not less than the applicable wage rates contained in any wage determination incorporated into the contract. The classifications set forth for each laborer or mechanic conform with the work performed.
- 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. (a) **Where fringe benefits are paid to approved plans, fund, 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	Craft	Explanation
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Remarks


(Authorized Agent Signature)

COMPLIANCE STATEMENT PREPARATION INSTRUCTIONS

This statement of compliance meets needs resulting from the amendment of the Davis-Bacon Act to include fringe benefits provisions. Under this amended law, the contractor is required to pay fringe benefits as predetermined by the Department of Labor, in addition to payment of the minimum rates. The contractor's obligation to pay fringe benefits may be met by payment of the fringes to the various plans, funds, or programs or by making these payments to the employees as cash in lieu of fringes. This statement of compliance is also a requirement under Wisconsin Supplemental Required Contract Provisions.

The contractor should **show on the face of his/her payroll all moneys paid to the employees** whether as basic rates or as cash in lieu of fringes. The contractor shall represent in the statement of compliance that **he/she is paying to others** fringes required by the contract and not paid as cash in lieu of fringes.

Detailed instructions follow:

Contractors who pay all required fringe benefits:

A contractor who pays fringe benefits to approved plans, funds, or programs in amounts not less than were determined in the applicable wage decision of the Secretary of Labor shall continue to show on the face of his/her payroll the basic cash hourly rate and overtime rate paid to employees, just as has always been done. Such a contractor shall check paragraph 4(a) of the statement to indicate he/she is also paying to approved plans, funds, or programs not less than the amount predetermined as fringe benefits for each craft. Any exception shall be noted in Section 4(c).

Contractors who pay no fringe benefits:

A contractor who pays no fringe benefits shall pay to the employee and insert in the straight time hourly rate column of his/her payroll an amount not less than the predetermined rate for each classification plus the amount of fringe benefits determined for each classification in the applicable wage decision. Since it is not necessary to pay time and a half on cash paid in lieu of fringes, the overtime rate shall be not less than the sum of the basic predetermined rate, plus the half time premium on the basic or regular rate, plus the required cash in lieu of fringes at the straight time rate. To simplify computation of overtime, it is suggested that the straight time basic rate and cash in lieu of fringes be separately stated in the hourly rate column, thus \$9.73/\$2.15. In addition, the contractor shall check paragraph 4(b) of the statement to indicate that he/she is paying fringe benefits in cash directly to the employees. Any exceptions shall be noted in Section 4(c).

Use of Section 4(c), Exceptions

Any contractor who is making payment to approved plans, funds, or programs in amounts less than the wage determination requires, is obliged to pay the deficiency directly to the employees as cash in lieu of fringes. Any exceptions to Section 4(a) or 4(b), whichever the contractor may check, shall be entered in Section 4(c). Enter in the Exception column the craft, and enter in the Explanation column the hourly amount paid the employees as cash in lieu of fringes, and the hourly amount paid to plans, funds, or programs as fringes.

Certified Payroll Transcript

Period: 10/05/2025 - 10/11/2025
Job: 5557010-78 M Jolma Inc.-Superior E 5th St.
Contract: 5557010-78 M Jolma Inc.-Superior E 5th St.

State Project Number:
Contract/Order #:

***** Liabilities *****

***** Weekly Totals *****
(Week Ending 10/11/25)

Employee	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Total	Rate	Amounts	Project Description	Rate	Amounts	Gross	Deductions	Net Pay		
Bryngelson David L - 193284	M/EX: M/0								Race/Sex W/M									
	Skidsteer Operator								EEO Class: Journeyman		Check # 1017251955							
	Skidsteer Operator	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8.00	44.510	Pension	14.39000	169.08	Federal Withholdin	371.25		
	Skidsteer Operator	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.900	10.58	Welfare	11.21000	131.72	FICA - Soc. Sec.	181.21		
	Skidsteer Operator	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.75	66.770	Skill Fund	0.70000	8.22	FICA - Medicare	42.38			
												Work Preservatic	0.30000	3.52	FICA - Addl Medica	148.18		
												IUOE National Tr	0.05000	0.59	Wisconsin Tax With	43.85		
												Other Taxable		14.69	Admin-Gross			
												Project Total			Admin-Benefit	24.87		
															Hours (Reg/OT):	2,922.82	811.74	2,111.08
Johnson Cody A - 193896	M/EX: F/0								Race/Sex W/M									
	Foreman								EEO Class: Journeyman		Check # 1017251955							
	Foreman	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.25	44.770	Pension	14.39000	129.51	Federal Withholdin	684.94		
	Foreman	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.900	8.11	Welfare	11.21000	100.89	FICA - Soc. Sec.	241.48		
	Foreman	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.75	67.160	Skill Fund	0.70000	6.30	FICA - Medicare	56.48			
												Work Preservatic	0.30000	2.70	FICA - Addl Medica	225.52		
												IUOE National Tr	0.05000	0.45	Wisconsin Tax With	58.43		
												Other Taxable		11.25	Admin-Gross			
												Project Total			Admin-Benefit	31.50		
															Local 139 - PAC Dr	3.76		
														Hours (Reg/OT):	3,894.93	1,302.11	2,592.82	
Koethe Brandon N - 192802	M/EX: S/0								Race/Sex W/M									
	Operating Apprentice - 4th Yr								EEO Class: Apprentice		Check # 1017251955							
	Operating Apprentice - 4th Yr	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8.00	41.400	Pension	7.20000	111.60	Federal Withholdin	840.82		
	Operating Apprentice - 4th Yr	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6.00	62.100	Welfare	11.21000	173.76	FICA - Soc. Sec.	266.26			
												Skill Fund	0.70000	10.84	FICA - Medicare	62.27		
												Work Preservatic	0.30000	4.64	FICA - Addl Medica	221.28		
												IUOE National Tr	0.05000	0.78	Wisconsin Tax With	64.42		
												Other Taxable		19.38	Admin-Gross			
												Project Total			Admin-Benefit	26.32		
															Hours (Reg/OT):	4,294.46	1,481.37	2,813.09

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Contract: 5557010-78 M Jolma Inc.-Superior E 5th St.

State Project Number:
Contract/Order #:

Employee	Sun Mon Tue Wed Thu Fri Sat Total							Project Rate Amounts	Description	Rate	Amounts	Gross	Deductions	Net Pay				
	Hours-----																	
O'Connell Eric P - 192202	M/EX: F/0							Race/Sex W/M	Check # 1017251955						***** Liabilities *****			
	Shaping Foreman														***** Weekly Totals *****			
	EEO Class: Journeyman														(Week Ending 10/11/25)			
	Shaping Foreman	0.00	0.00	0.00	0.00	0.00	0.00			0.00	8.00	48.270	Pension	14.39000	239.84	Federal Withholdin	1,007.71	
	Shaping Foreman	0.00	0.00	0.00	0.00	0.00	0.00			0.00	0.900	Welfare	11.21000	182.16	FICA - Soc. Sec.	321.47		
	Shaping Foreman	0.00	0.00	0.00	0.00	1.50	6.75			8.25	72.405	Skill Fund	0.70000	11.36	FICA - Medicare	75.18		
												Work Preservatic	0.30000	4.86	FICA - Addl Medica	268.89		
												IUOE National Tr	0.05000	0.81	Wisconsin Tax Writ	77.76		
												Annuity	1.25000	20.31	Admin-Gross	37.09		
												Project Total			Admin-Benefit			
												Local 139 - PAC Dc						
												Hours (Reg/OT): 40.00 / 46.75						
													5,184.91	1,788.10	3,396.81			
Pocernich Caleb J - 192353	M/EX: M/0							Race/Sex W/M	Check # 1017251955						***** Liabilities *****			
	Shaping Tag														***** Weekly Totals *****			
	EEO Class: Journeyman														(Week Ending 10/11/25)			
	Shaping Tag	0.00	0.00	0.00	0.00	0.00	0.00			4.00	41.400	Pension	14.39000	100.73	Federal Withholdin	342.28		
	Shaping Tag	0.00	0.00	0.00	0.00	0.00	3.00			62.100	Welfare	11.21000	78.47	FICA - Soc. Sec.	171.97			
											Other Taxable	0.70000	4.90	FICA - Medicare	40.23			
											Other Non Taxable	0.30000	2.10	FICA - Addl Medica	141.10			
											IUOE National Tr	0.05000	0.35	Wisconsin Tax Writ	41.60			
											Annuity	1.25000	8.75	Admin-Gross	24.27			
											Project Total				Admin-Benefit			
												Local 139 - PAC Dc						
												Hours (Reg/OT): 40.00 / 18.00						
													2,773.81	764.35	2,009.46			
Scharp Matthew R - 194055	M/EX: H/0							Race/Sex I/M	Check # 1017251955						***** Liabilities *****			
	Shaping Tag														***** Weekly Totals *****			
	EEO Class: Journeyman														(Week Ending 10/11/25)			
	Shaping Tag	0.00	0.00	0.00	0.00	0.00	0.00			4.50	41.400	Pension	14.39000	179.88	Federal Withholdin	618.16		
	Shaping Tag	0.00	0.00	0.00	0.00	0.00	4.00			62.100	Welfare	11.21000	140.13	FICA - Soc. Sec.	230.69			
											Other Taxable	0.70000	8.75	FICA - Medicare	53.96			
											Other Non Taxable	0.30000	3.75	FICA - Addl Medica	190.88			
											IUOE National Tr	0.05000	0.63	Wisconsin Tax Writ	55.81			
											Annuity	1.25000	15.63	Admin-Gross	30.66			
											Project Total				Admin-Benefit			
												Local 139 - PAC Dc						
												Hours (Reg/OT): 40.00 / 33.25						
													3,720.87	1,180.16	2,540.71			

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State Project Number:
Contract/Order #:

Job Totals	Hours	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Total	Project Amounts	***** Liabilities *****			***** Weekly Totals ***** (Week Ending 10/11/25)			
											Description	Rate	Amounts	Gross Total	Deductions	Net Pay	
Regular Hourly	0.00	0.00	0.00	0.00	0.00	0.00	36.75	0.00	36.75	1,615.61	Pension		924.64	Federal Withholdin	3,865.16		
Fringe Variable - C	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	33.32	Welfare		807.13	FICA - Soc. Sec.	1,413.08		
Auto Overtime	0.00	0.00	0.00	0.00	0.00	3.00	28.25	4.00	35.25	2,315.62	Skill Fund		50.37	FICA - Medicare	330.50		
										0.00	Work Preservatlc		21.57	FICA - Addl Medica			
										0.00	UOE National Tr		3.61	Wisconsin Tax With	1,195.85		
										0.00	Other Non Taxable		90.01	Admin-Gross	341.87		
										3,964.55	Project Total			Admin-Benefit	174.71		
														Local 139 - PAC De	6.66		
														Hours (Reg/OT):	22,791.80	7,327.83	15,463.97
																240.00 / 193.75	