

# How To Correctly Fill Out the MnDOT Payroll Form.

This form is for the contractor's optional use. The contractor's option is to have a computer generated form. Although computer generated form must show all of the following information to be accepted as a payroll for the project.

Please include the lowest state project number as listed on the contract.

**Fill Out Completely.**

Payrolls must be numbered sequentially based on the weeks worked on the project. Write the word "Final" on the last payroll you submit.

## Minnesota Department of Transportation Prevailing Wage Payroll Report

|  |                 |                                     |         |   |      |        |                       |                  |   |  |                      |                     |                              |                                     |                 |             |           |                 |                 |                  |                      |
|--|-----------------|-------------------------------------|---------|---|------|--------|-----------------------|------------------|---|--|----------------------|---------------------|------------------------------|-------------------------------------|-----------------|-------------|-----------|-----------------|-----------------|------------------|----------------------|
| Contractor Name  |                 | John Doe Construction               |         |   |      |        | Prime Contractor Name |                  | Doe Development Inc.                    |  |                      |                     |                              |                                     |                 |             |           |                 |                 |                  |                      |
| Address and Telephone #  |                 | 395 John Ireland Blvd. St. Paul, MN |         |   |      |        | Address & Telephone # |                  | 1500 W County Rd B2 Roseville, MN 55113 |  |                      |                     |                              |                                     |                 |             |           |                 |                 |                  |                      |
| State Project / Contract Number  |                 | Low SP # or # On Specification      |         | Pay Period End Date                                   |      | 7/7/00 |                       | Project Location |   | Roadway and County or City and Bldg/Tower Name |                      | Payroll #           | 8                            |                                     |                 |             |           |                 |                 |                  |                      |
| (1)  | (2)             | (3)                                 | (4)     | (5) Day of Week (M, T, W, R, F, S, Su) & Date (xx/xx) |      |        |                       |                  |   |  | (6)                  | (7)                 | (8)                          | (9)                                 | (10) Deductions |             |           |                 | (11)            |                  |                      |
| Employee Name, Address and Last Four Digits of Social Security Number              | # of Exemptions | Labor Code and Classification Title | OT & ST | Su  | M    | T      | W                     | R                | F                                       | S  | Total Hours This Job | Hourly Rates of Pay | Gross Amount Earned This Job | Gross Amount Earned This Pay Period | FICA            | Federal Tax | State Tax | Other (Specify) | Other (Specify) | Total Deductions | Total Net Wages Paid |
|  |                 |                                     |         | 7/1   | 7/2  | 7/3    | 7/4                   | 7/5              | 7/6                                     | 7/7  |                      |                     |                              |                                     |                 |             |           | medicare        |                 |                  |                      |
| Connie Doe<br>Address<br>City State Zip Code<br>Last 4 digits of Social Security # | 2               | 370                                 | OT      | 2.00  | 2.00 | 2.00   | 2.00                  | 2.00             |   |  | 8.00                 | 31.88               | 935.04                       | 998.80                              | 39.25           | 85.00       | 38.00     | 9.25            |                 | 171.50           | 827.30               |
|  |                 | Bituminous Roller                   | ST      | 8.00  | 8.00 | 8.00   | 8.00                  |                  |   |  | 32.00                | 21.25               |                              |                                     |                 |             |           |                 |                 |                  |                      |

Employees Name, Address and Last 4 Digits of Social Security Number Must Appear on the Payroll that the Employee Works on the Project. Proceeding Payrolls Only Require the Employee's Name.

The Days and Dates of the Pay Period.

Job Classification Number  
From the Contract Wage Determinations and/ or the Corresponding Job Title.

Total Overtime and Straight Time Hours Worked on this Project.

Total Gross Amount Earned this Pay Period.

Gross Amount Earned While Working on this Project for this Pay Period.

Net Amount Paid to the Employee for this Pay Period.

Must Accurately Reflect Overtime and the Straight Time Hours.

### **Minnesota State Statue 177.41 through 177.44:**

The Prevailing Hours of Labor are 8 hours a day and 40 hours per week. All hours in excess of the prevailing hours of labor must be paid at 1.5 times the hourly rate of pay paid to the Laborer and Mechanic.

# How To Report: Time and Wages If An Employee Works in More Than One Classification During the Pay Period

An Employee That Only Works on This Project During the Pay Period.

## Minnesota Department of Transportation Prevailing Wage Payroll Report

| Contractor Name   |                 | John Doe Construction               |          |   |      | Prime Contractor Name |      | Doe Development Inc.                    |      |  |                      |                     |                              |                                     |                 |             |           |                 |                 |                  |                      |
|---|-----------------|-------------------------------------|----------|---|------|-----------------------|------|---|------|--|----------------------|---------------------|------------------------------|-------------------------------------|-----------------|-------------|-----------|-----------------|-----------------|------------------|----------------------|
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| State Project / Contract Number   |                 | Low SP # or # On Specification      |          | Pay Period End Date                                   |      | 7/7/00                |      | Project Location                        |      | Roadway and County or City and Bldg/Tower Name |                      |                     | Payroll #                    | 8                                   |                 |             |           |                 |                 |                  |                      |
| (1)   | (2)             | (3)                                 | (4)      | (5) Day of Week (M, T, W, R, F, S, Su) & Date (xx/xx) |      |                       |      |   |      |  | (6)                  | (7)                 | (8)                          | (9)                                 | (10) Deductions |             |           | (11)            |                 |                  |                      |
| Employee Name, Address and Last Four Digits of Social Security Number                 | # of Exemptions | Labor Code and Classification Title | OT & ST  | Su  | M    | T                     | W    | R                                       | F    | S  | Total Hours This Job | Hourly Rates of Pay | Gross Amount Earned This Job | Gross Amount Earned This Pay Period | FICA            | Federal Tax | State Tax | Other (Specify) | Other (Specify) | Total Deductions | Total Net Wages Paid |
|   |                 |                                     |          | 7/1   | 7/2  | 7/3                   | 7/4  | 7/5                                     | 7/6  | 7/7  |                      |                     |                              |                                     |                 |             |           | medicare        |                 |                  |                      |
| Connie Doe<br>Address<br>City State Zip Code<br>Last 4 digits of Social Security #    | 2               | 370<br>Bituminous Roller            | OT<br>ST |   | 8.00 |                       | 4.00 |   |      | 3.00   | 15.00                | 21.88               | 318.75                       | 394.99                              | 16.00           | 42.00       | 16.00     | 4.60            |                 | 78.60            | 316.39               |
|   |                 | 101<br>Laborer, Common              | OT<br>ST |   |      |                       | 4.00 |   |      |  | 4.00                 | 19.06               | 76.24                        |                                     |                 |             |           |                 |                 |                  |                      |
| Robert Austin<br>Address<br>City State Zip Code<br>Last 4 digits of Social Security # | 1               | 704<br>Carpenter                    | OT<br>ST |   | 8.00 | 8.00                  | 8.00 | 8.00                                    | 8.00 |  | 40.00                | 22.85               | 914.00                       | 914.00                              | 39.25           | 85.00       | 38.00     | 9.25            |                 | 171.50           | 742.50               |

Connie Doe Worked In More Than One Classification During This Pay Period.

Break The Classifications Apart by Using Two or More Lines on the Payroll Report To Distinguish the Different Classifications.

Combine the Two Classifications for the Gross Amount Earned for this Project and Total Gross Amount Earned this Pay Period.

Robert Austin Only Worked on This Project During This Pay Period.

The Gross Amount Earned for this Project and The To-

# How To Report: A Registered Apprentice Working On The Project.

## Minnesota Department of Transportation Prevailing Wage Payroll Report

| Contractor Name  |                 | John Doe Construction               |         |   |     | Prime Contractor Name |     | Doe Development Inc.                    |     |  |                      |                     |                              |                                    |       |             |           |                 |                 |                  |                      |
|--|-----------------|-------------------------------------|---------|---|-----|-----------------------|-----|---|-----|--|----------------------|---------------------|------------------------------|------------------------------------|-------|-------------|-----------|-----------------|-----------------|------------------|----------------------|
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| State Project / Contract Number  |                 | Low SP # or # On Specification      |         | Pay Period End Date                                   |     | 7/7/00                |     | Project Location                        |     | Roadway and County or City and Bldg/Tower Name |                      | Payroll #           | 8                            |                                    |       |             |           |                 |                 |                  |                      |
| (1)  | (2)             | (3)                                 | (4)     | (5) Day of Week (M, T, W, R, F, S, Su) & Date (xx/xx) |     |                       |     |   |     |  | (6)                  | (7)                 | (8)                          |                                    | (9)   |             |           | (10) Deductions |                 | (11)             |                      |
| Employee Name, Address and Last Four Digits of Social Security Number                | # of Exemptions | Labor Code and Classification Title | OT & ST | Su  | M   | T                     | W   | R                                       | F   | S  | Total Hours This Job | Hourly Rates of Pay | Gross Amount Earned This Job | Gross Amount Eamed This Pay Period | FICA  | Federal Tax | State Tax | Other (Specify) | Other (Specify) | Total Deductions | Total Net Wages Paid |
|  |                 |                                     |         | 7/1   | 7/2 | 7/3                   | 7/4 | 7/5                                     | 7/6 | 7/7  |                      |                     |                              |                                    |       |             |           | medicare        |                 |                  |                      |
| Joe Smith<br>Address<br>City State Zip Code<br>Last 4 digits of Social Security #    | 2               | Apprentice Carpenter<br>#XXXXXX 40% | OT      |   |     |                       |     |   |     |  |                      |                     | 152.60                       | 394.99                             | 16.00 | 42.00       | 16.00     | 4.60            |                 | 78.60            | 316.39               |
| Jane Johnson<br>Address<br>City State Zip Code<br>Last 4 digits of Social Security # | 10              | 704<br>Carpenter                    | OT      |   |     |                       |     |   |     |  |                      |                     | 510.00                       | 510.00                             |       |             |           |                 |                 |                  | 510.00               |

Apprentice  
Carpenter  
I.D.# XXXXXX

Joe Smith Is A Registered Apprentice Carpenter. Must State This On Payroll Report For Classification.

Must Include His Apprentice I. D. Number Issued From the United States Department of Labor or the Minnesota Department Of Labor and Industry, Division of Apprenticeship.

Must Include His Current Pay Progression Step.