CITY OF SAN JOSE PUBLIC WORKS PAYROLL REPORTING FORM

CONTRACTOR

PRIME   SUBCONTRACTOR

PAYROLL NO.   **FOR WEEK ENDING**   **PROJECT AND LOCATION**

EMPLOYEE NAME, ADDRESS AND SOCIAL SECURITY NUMBER	WORK CLASSIFICATION		DAY AND DATE	TOTAL HOURS	HOURLY RATE OF PAY	GROSS AMOUNT EARNED			DEDUCTIONS – EMPLOYEES PAID (DOES NOT INCLUDE BENEFIT OR OTHER EMPLOYER PAYMENTS)					
EMPLOYEE:	San José Project Classification:	S				SAN JOSE PROJECT	TRAVEL & SUBSISTENCE & CONGESTION ZONE FEE	TOTAL ALL WORK	FED TAX	FICA (Soc. Sec.)	STATE TAX	STATE DISABILITY INS. (SDI)	HEALTH WELFARE	NET WAGES PAID
		O												
	All Other Work:	S							PENSION	SAVINGS	GARNISHMENT	OTHER*	TOTAL DEDUCTIONS	CHECK NO.
		O												
EMPLOYEE:	San José Project Classification:	S				SAN JOSE PROJECT	TRAVEL & SUBSISTENCE & CONGESTION ZONE FEE	TOTAL ALL WORK	FED TAX	FICA (Soc. Sec.)	STATE TAX	STATE DISABILITY INS. (SDI)	HEALTH WELFARE	NET WAGES PAID
		O												
	All Other Work:	S							PENSION	SAVINGS	GARNISHMENT	OTHER*	TOTAL DEDUCTIONS	CHECK NO.
		O												
EMPLOYEE:	San José Project Classification:	S				SAN JOSE PROJECT	TRAVEL & SUBSISTENCE & CONGESTION ZONE FEE	TOTAL ALL WORK	FED TAX	FICA (Soc. Sec.)	STATE TAX	STATE DISABILITY INS. (SDI)	HEALTH WELFARE	NET WAGES PAID
		O												
	All Other Work:	S							PENSION	SAVINGS	GARNISHMENT	OTHER*	TOTAL DEDUCTIONS	CHECK NO.
		O												
EMPLOYEE:	San José Project Classification:	S				SAN JOSE PROJECT	TRAVEL & SUBSISTENCE & CONGESTION ZONE FEE	TOTAL ALL WORK	FED TAX	FICA (Soc. Sec.)	STATE TAX	STATE DISABILITY INS. (SDI)	HEALTH WELFARE	NET WAGES PAID
		O												
	All Other Work:	S							PENSION	SAVINGS	GARNISHMENT	OTHER*	TOTAL DEDUCTIONS	CHECK NO.
		O												

S = Straight time

O = Overtime

* Other = Any other deductions, whether included or required by prevailing wage determinations, must be separately listed. Use extra sheet if necessary.