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Business Name (DBA): LIGHTHOUSE ELECTRICAL CONTRACTORS, INC.  Phone: (541) 991-7015  CCB Registration Number: 206039  Project Name: Suslaw 3D Siuslaw HSproject Number: 09 - 22 - 101 IN  Street Address: 2915 Dax Street , Florence, DR 91439  Mailing Address:  Date Pay Period Began: 8/14/2022  THIS SECTION FOR PRIME CONTRACTORS ONLY  Public Contracting Agency Name:  Phone: ( )  Date Contract Specifications First Advertised for Bid:  Contract Amount:  Prime Contractor Business Name (DBA):  Prime Contractor Phone: ( )  Prime Contractor Phone: ( )  Prime Contractor Segistration Number:  Date You Began Work on the Project:  (1) (2) (3) DAY AND DATE (4) (5) (6) (7) (8) (9) (10) (11)  NAME, ADDRESS AND DEATHFORD INCLUDE GROUP; STEP IF APPLICABLE)  DEATHFORTON NUMBER  PROGRAM  HOURLY PRINCE  BENEFIT AMOUNTS  PROGRAM  HOURLY PRINCE  BENEFIT AMOUNTS  PROGRAM  HOURLY PRINCE  BENEFIT AMOUNTS  PROGRAM  HOURLY PRINCE  PAGES AMOUNT  TO BENEFIT TO BE	PRIME CONTRACTOR	<u>□s</u> ∪	BCON	TRAC	TOR	X					PAYROLL	NO.		1			FINAL DAVO	<del>\</del>	
Type of Work: Electrical  Sireel Address: 2915 Oct. Street , Florence, DR 97139  Project County: Florence, OR Project County: Lane County  This SECTION FOR PRIME CONTRACTORS ONLY  Public Contracting Agency Name:  Project County: Lane County  This SECTION FOR PRIME CONTRACTORS ONLY  Public Contracting Agency Name:  Prime Contractor Business Name (DBA):  Prime Contractor Phone: ( )  Prime Con	Business Name (DBA): LIGHTHOUSE ELECTRICAL CONTRACTORS, INC.									C.						)6039			
Project Location: Florence. ON Project County: Lane County  Date Pay Period Began: B/14/2022 Date Pay Period Ended: 08/20/2022  THIS SECTION FOR PRIME CONTRACTORS ONLY  Public Contracting Agency Name:  Phone: ( )  Date Contract Specifications First Advertised for Bid:  Contract Amount:    1	Project Name: Siuslaw SD Siuslaw HSPmiert Number: 09-22-1111																		
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ST	1020 PRESTWICK CT	ELECTRICAL	ОТ											7	172.79	764.59	\$2.20	REGENCE	
ST	FLORENCE, OR 97439 571-85-3155		<u> </u>		<del> </del>	<del> </del>		<del> </del>	<u> </u>	<u> </u>	<del> </del>	40.00	18.00					BLUE CROSS	
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WH-38 (Rev 06/16)

<sup>\*</sup>Although this form has not been officially approved by the U.S. Department of Labor, it is designed to meet the requirements of both the state PWR law and the federal Davis-Bacon Act.

**CERTIFIED STATEMENT** 

	DIATEMENT							
Date: 812412022	In addition to completing sections (1) - (3), if your project is subject to the federal							
I, DAN CLARK PRESIDENT (NAME OF SIGNATORY PARTY) (TITLE)	Davis-Bacon Act requirements, complete the following section as well:							
do hereby state:	(4) That: (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS OR							
(1) That I pay or supervise the payment of the persons employed by:  LIGHTHOUSE ELECTRICAL CONTRACTORS, INC.	PROGRAMS							
(CONTRACTOR, SUBCONTRACTOR OR SURETY) on the, that during the payroll period  (BUILDING OR WORK)  commencing on the 14TH day of AUGUST 2022, and ending the 20TH day  (MONTH) (YEAR)  of AUGUST 2022, all persons employed on said project have been paid the	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.							
I (MONIT) (TEAR)	(b) WHERE FRINGE BENEFITS ARE PAID IN CASH							
full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said  (CONTRACTOR, SUBCONTRACTOR OR SURETY) from the full weekly wages earned by any person, and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as specified in ORS 652.610, and 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:	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:  EXCEPTION (CRAFT) EXPLANATION							
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for workers contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each worker conform with work performed.								
(3) That 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.	REMARKS:							
I HAVE READ THIS CERTIFIED STATEMENT, KNOW THE CONTENTS THEREOF AND IT IS TRUE TO MY KNOWLEDGE:	NAME AND TITLE SIGNATURE							
DAN CLARK - PRESIDENT (NAME AND TITLE)  8/24/2022	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS 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.							
(SIGNATURE AND DATE)								
FIT P TIME WARREN TO THE TIME								

FILE THIS FORM WITH THE PUBLIC AGENCY ASSOCIATED WITH THE PROJECT

NOTE TO CONTRACTORS: YOU MUST ATTACH COPIES OF THIS FORM TO EACH OF YOUR PAYROLL SUBMISSIONS ON THIS PROJECT.

INSTRUCTIONS AND ADDITIONAL FORMS ARE AVAILABLE ON OUR WEBSITE: WWW.OREGON.GOV/BOLI.

PRIME CONTRACTOR	☐ St	JBCON	NTRA	CTOR	X					PAYROLL	NO.		_				<u>.                                    </u>
Business Name (DE	3A): LIGHTHOUSE I	ELEC	TRIC	AL C	ONT	RAC	TOR	S. IN	C.	PAIROLL	NO.	Phone: / f	2	E	0000	FINAL PAYRO	<u> </u>
Business Name (DBA): LIGHTHOUSE ELECTRICAL CONTRACTORS, INC.  Project Name: Sinslam SD Sinslam HS Project Number: 09-22-011 N  Street Address:									Phone: (541) 991-7015 CCB Registration Number: 206039								
Street Address:			<u>Proje</u>	ed N	umbe	L 0,	1- L	2-0	וו או		Type of	Work:	ectrical				
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Malling Address:				` ,				14, 1	17.	<b>.</b> ,	Project	Country	Florence	ב. טוע	-		
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THIS SECTION FOR PRIME CONTRACTORS ONLY													THIS SECT	ION FOR SI	UBCONTRAC	TORS ONLY	<del></del>
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## **CERTIFIED STATEMENT**

Date: 8/24/2822	In addition to completing sections (1) - (3), if your project is subject to the federal Davis-Bacon Act requirements, complete the following section as well:							
I. DAN CLARK PRESIDENT	but 3-batton Act requirements, complete the following section as well:							
(NAME OF SIGNATORY PARTY)	(4) That:							
do hereby state:								
(1) That I pay or supervise the payment of the persons employed by:	(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS OR PROGRAMS							
LIGHTHOUSE ELECTRICAL CONTRACTORS, INC.	FROGRAMS							
(CONTRACTOR, SUBCONTRACTOR OR SUBETY)	D = In addition to the basic bourty wage rates paid to each laborate as marked:							
on the; that during the payroll period								
(BUILDING OR WORK)	IISTED IN the above referenced payroll, payments of fringe benefits as listed in							
· · · · · · · · · · · · · · · · · · ·	Ine contract have been or will be made to appropriate programs for the benefit							
	of such employees, except as noted in Section 4(c) below.							
of AUGUST 2022, all persons employed on said project have been paid the	, , , , , , , , , , , , , , , , , , , ,							
(MONTH) (YEAR)	(b) WHERE FRINGE BENEFITS ARE PAID IN CASH							
full weekly wages earned, that no rebates have been or will be made either directly or	Each laborer or mechanic listed in the above referenced power! has been asked							
indirectly to or on behalf of said								
(CONTRACTOR SUBCONTRACTOR OR SUBCTOR	as Indicated on the payroll, an amount not less than the sum of the applicable							
If Utili the full weekly wages earned by any person, and that no deductions have been been	basic hourly wage rate plus the amount of the required fringe benefits as listed							
made either directly or indirectly from the full wages earned by any person, other than	in the contract, except as noted in Section 4(c) below.							
permissible deductions as specified in ORS 652.610, and as defined in Regulations.	l +							
Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act,	(c) EXCEPTIONS:							
as amended (48 Stat. 948 63 Stat. 108 32 Stat. 967 75 Or 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:	EXCEPTION (CRAFT) EXPLANATION							
and accompce pelow,								
(2) That any powelle other is and all								
(2) That any payrolls otherwise under this contract required to be submitted for the								
above period are correct and complete; that the wang rates for workers contained								
under an are not less than the applicable ware rates contained in any ware								
determination incorporated into the contract: that the classifications not forth thorsis								
for each worker conform with work performed.								
(3) That are a second of the s								
(3) That any apprentices employed in the above period are duly registered in a bona	REMARKS:							
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by the oureau of Apprenticeship and Training United States Department of Labor, or	<b>i</b> i							
in the such recognized adency exists in a state, are registered with the Riveau of	11							
Apprenticeship and Training, United States Department of Labor.								
	NAME AND TITLE SIGNATURE							
I HAVE READ THIS CERTIFIED STATEMENT, KNOW THE CONTENTS THEREOF	NAME AND TITLE SIGNATURE							
AND IT IS TRUE TO MY KNOWLEDGE:								
DAN CLARK - PRESIDENT	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY							
(NAME AND TITLE)	SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL							
	PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31							
8 24 2022	OF THE UNITED STATES CODE.							
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FILE THIS FORM WITH THE PUBLIC AGENCY ASSOCIATED WITH THE PROJECT								

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INSTRUCTIONS AND ADDITIONAL FORMS ARE AVAILABLE ON OUR WEBSITE: WWW.OREGON.GOV/BOLI.