

From: [Forsberg, Kristen](#)
To: [Steven Troiano](#)
Subject: RE: Public Records Request : For Certified Payroll Records on Fernandes Masonry Inc. for their work on the New Leicester Fire Station - EMS Headquarters
Date: Tuesday, April 04, 2017 3:33:00 PM
Attachments: [20170404113025197.pdf](#)

Hi Steven,

Attached please find the certified payrolls we have received for Fernandes Masonry during the requested time period. Thanks,

Kristen L. Forsberg
Assistant to the Town Administrator
Town of Leicester
3 Washburn Square
Leicester, MA 01524
508-892-7000

From: Steven Troiano [mailto:mifwa@aol.com]
Sent: Tuesday, April 04, 2017 10:08 AM
To: Forsberg, Kristen <forsbergk@leicesterma.org>
Subject: Public Records Request : For Certified Payroll Records on Fernandes Masonry Inc. for their work on the New Leicester Fire Station - EMS Headquarters

Dear Ms. Forsberg;

My name is Steven Troiano I represent the Masonry Industry Fair Wage Alliance, In accordance with M.G.L. chapter 66, sec. 10, I am making request for payroll records on Fernandes Masonry Inc. for their work on the New Fire Station & EMS Headquarters. I will be looking for payrolls records from weekending 2/18/2017 through March 31, 2017. Once the request is made the awarding authority has 10 days to produce the records. Please leave the address of the employees of Fernandes Masonry, that is Legal. No Social Security Numbers.

If there is a charge for these records I agree to pay accordingly. Please send the and Invoice to the Masonry Industry Fair Wage Alliance at P.O. Box 3432 Worcester, MA 01613. or by e-mail mifwa@aol.com or by fax (508) 7979640. Any questions I can be reach by telephone (508) 397-0301.

Sincerely
Steve Troiano
Masonry Industry Compliance Investigator
mifwa@aol.com



RECEIVED MAR 06 2017

LETTER OF TRANSMITTAL

To:	Town of Leicester 3 Washburn Square Leicester, MA 01524	Date:	March 1, 2017
		Attn:	Kevin J. Mizikar Town Administrator
		Via:	Mail
		Re:	Leicester Fire & EMS Leicester, MA

Transmittal Information			
Pages	Date	No.	Description
4	3/1/2017	1	Please find attached an original of the Certified Payroll report for week ending WE 2/18/2017

Remarks:

PLEASE FEEL FREE TO CALL WITH ANY QUESTIONS OR CONCERNS.

SINCERELY,

Molly Reid

Molly Reid
ADMINISTRATIVE ASSISTANT

1031 Phillips Road, New Bedford, MA 02745
Tel: 508.998.2121 Fax: 508.985.0003

www.fernandesmasonry.com
SDO PBE/DBE Certified

WEEKLY PAYROLL RECORDS REPORT & STATEMENT OF COMPLIANCE

In accordance with Massachusetts General Law c149, §27B, a true and accurate record must be kept of all persons employed on the public works project for which the enclosed rates have been provided. A Payroll Form has been printed on the reverse side of this page and includes all the information required to be kept by law. Every contractor or subcontractor is required to keep these records and preserve them for a period of three years from the date of completion of the contract.

In addition, every contractor and subcontractor is required to submit a copy of their weekly payroll records to the awarding authority. This is required to be done on a weekly basis. Once collected, the awarding authority is also required to preserve those records for three years.

In addition, each such contractor, subcontractor or public body shall furnish to the Department of Labor & Workforce Development/Division of Occupational Safety within fifteen days after completion of its portion of the work a statement, executed by the contractor, subcontractor or public body who supervises the payment of wages, in the following form:

STATEMENT OF COMPLIANCE

February 18, 2017

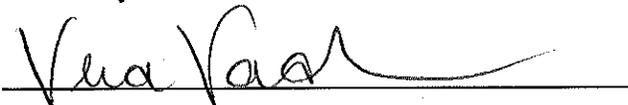
I, Vera Vadeboncoeur, Payroll Administrator
(Name of signatory party) (Title)

do hereby state:

That I pay or supervise the payment of the persons employed by

Fernandes Masonry Inc on the 1610-00 Leicester Fire and EMS
(Contractor, subcontractor or public body)

and that all mechanics and apprentices, teamsters, chauffeurs and laborers employed on said project have been paid in accordance with wages determined under provisions of sections twenty-six and twenty-seven of chapter one hundred and forty nine of the General Laws.

Signature 

Title Payroll Administrator

MASSACHUSETTS WEEKLY CERTIFIED PAYROLL REPORT FORM



Company's Name:		Address:		Phone No.:	Payroll No.:													
Fernandes Masonry, Inc.		1031 Phillips Rd. New Bedford, MA		508-998-2121	5													
Employer's Signature:		Title:		Contract No.:	Work Week Ending:													
<i>Vera Foad</i>		Payroll Administrator		04-3377972	2/18/2017													
Awarding Authority's Name:		Public Works Project Name:		Min. Wage Rate Sheet No.:														
Town of Leicester		Leicester Fire & EMS		3 Paxton St. Leicester, MA														
General / Prime Contractor's Name:		Subcontractor's Name:		"Employer" Hourly Fringe Benefit Contributions														
Builders Systems		Fernandes Masonry, Inc.																
Employee Name & Complete Address	Employee is OS-HA 10 Certified (?)	Work Classification:	Appr. Rate (%)	Hours							Hourly Base Wage (B)	Health & Welfare Insurance (C)	ERISA Pension Plan (D)	Supp. Unemp. (E)	Total Hourly Prev. Wage (F)	(A x F)		Check No. (H)
				Su.	Mo.	Tu.	We.	Th.	Fr.	Sa.						Project Hours (A)	Total Gross Wages (G)	
Roberto Carreiro 872 Banlett Street New Bedford, MA 02745	<input checked="" type="checkbox"/>	BRICKLAYER					8.00	8.00	8.00				18.620		77.46	1471.74	2147.04	DD/67081
Alvaro P. Correia 286 Moss Street S. Dartmouth, MA 02748-1723	<input checked="" type="checkbox"/>	BRICKLAYER					8.00	8.00	8.00				18.620		77.46	2478.72	2478.72	Direct Deposit
Reginald J. Dagesse 44 Tampa Street Nashua, NH 03064	<input checked="" type="checkbox"/>	LABORER						6.00	4.00	6.00			12.650		52.75	844.00	1974.08	Direct Deposit
Reginald J. Dagesse 44 Tampa Street Nashua, NH 03064	<input checked="" type="checkbox"/>	MACHINE OPERATOR					8.00	2.00	4.00	2.00			14.900		70.63	1130.08	1974.08	Direct Deposit
Antonio M. Ferreira 249 Tinkham Street, 1st Floor New Bedford, MA 02745	<input checked="" type="checkbox"/>	LABORER						8.00	8.00	8.00			12.650		52.75	1266.00	1266.00	Direct Deposit
Kevin Pacheco 159 Sylvia Street New Bedford, MA 02745	<input checked="" type="checkbox"/>	LABORER					8.00						12.650		52.75	422.00	1052.00	Direct Deposit
Joseph Pereira 153 Hathaway Road Acushnet, MA 02743	<input checked="" type="checkbox"/>	LABORER					8.00	8.00	8.00	8.00			12.650		52.75	1688.00	1688.00	Direct Deposit

NOTE: Pursuant to MGL Ch. 149 s.27B, every contractor and subcontractor is required to submit a "true and accurate" copy of their weekly payroll records directly to the awarding authority. Failure to comply may result in the commencement of a criminal action or the issuance of a civil citation.

Date received by awarding authority _____ / _____ / _____

MASSACHUSETTS WEEKLY CERTIFIED PAYROLL REPORT FORM



Company's Name: Fernandes Masonry, Inc.		Address: 1031 Phillips Rd. New Bedford, MA		Phone No.: 508-998-2121		Payroll No.: 5	
Employer's Signature: 		Title: Payroll Administrator		Contract No.: 04-3377972		Work Week Ending: 2/18/2017	
Awarding Authority's Name: Town of Leicester		Public Works Project Name: Leicester Fire & EMS		Public Works Project Location: 3 Paxton St. Leicester, MA		Min. Wage Rate Sheet No.:	
General / Prime Contractor's Name: Builders Systems		Subcontractor's Name: Fernandes Masonry, Inc.		"Employer" Hourly Fringe Benefit Contributions:			

Employee Name & Complete Address	Employee is OSHA 10 Certified (?)	Work Classification:	Appr. Rate (%)	Worked							Hours		Health & Welfare Insurance (C)	ERISA Pension Plan (D)	Supp. Unemp. (E)	Total Hourly Prev. Wage (F)	(A x F)		Check No. (H)				
				Su.	Mo.	Tu.	We.	Th.	Fr.	Sa.	Su.	All Other Hours					Total Gross Wages (G)	Total Gross Wages (G)					
Jordan A. Raposo 79 Katherine St. New Bedford, MA 02740	<input checked="" type="checkbox"/>	LABORER			8.00	8.00	8.00	8.00					32.00	0.00	40.100	12.650		52.75	1688.00	1688.00	67072		
Jeffrey L. Realejo 42 Valentine Street New Bedford, MA 02744	<input checked="" type="checkbox"/>	BRICKLAYER			8.00								8.00	24.00	58.840	18.620		77.46	619.68	2557.20	67073		
Carlos M. Rodrigues 10 Bow Drive Acushnet, MA 02743-1733	<input checked="" type="checkbox"/>	BRICKLAYER			8.00	8.00			5.00				21.00	0.00	58.840	18.620		77.46	1626.66	1626.66			
	<input type="checkbox"/>																						
	<input type="checkbox"/>																						
	<input type="checkbox"/>																						
	<input type="checkbox"/>																						

NOTE: Pursuant to MGL Ch. 149 s.27B, every contractor and subcontractor is required to submit a "true and accurate" copy of their weekly payroll records directly to the awarding authority. Failure to comply may result in the commencement of a criminal action or the issuance of a civil citation.



RECEIVED MAR 13 2017

LETTER OF TRANSMITTAL

To:	Town of Leicester 3 Washburn Square Leicester, MA 01524	Date:	March 8, 2017
		Attn:	Kevin J. Mizikar Town Administrator
		Via:	Mail
		Re:	Leicester Fire & EMS Leicester, MA

Transmittal Information			
Pages	Date	No.	Description
4	3/8/2017	1	Please find attached an original of the Certified Payroll report for week ending WE 2/25/2017

Remarks:

PLEASE FEEL FREE TO CALL WITH ANY QUESTIONS OR CONCERNS.

SINCERELY,

Molly Reid

Molly Reid
ADMINISTRATIVE ASSISTANT

1031 Phillips Road, New Bedford, MA 02745
Tel: 508.998.2121 Fax: 508.985.0003

www.fernandesmasonry.com
SDO PBE/DBE Certified

WEEKLY PAYROLL RECORDS REPORT & STATEMENT OF COMPLIANCE

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In addition, every contractor and subcontractor is required to submit a copy of their weekly payroll records to the awarding authority. This is required to be done on a weekly basis. Once collected, the awarding authority is also required to preserve those records for three years.

In addition, each such contractor, subcontractor or public body shall furnish to the Department of Labor & Workforce Development/Division of Occupational Safety within fifteen days after completion of its portion of the work a statement, executed by the contractor, subcontractor or public body who supervises the payment of wages, in the following form:

STATEMENT OF COMPLIANCE

February 25, 2017

I, Vera Vadeboncoeur, Payroll Administrator
(Name of signatory party) (Title)

do hereby state:

That I pay or supervise the payment of the persons employed by

Fernandes Masonry Inc on the 1610-00 Leicester Fire and EMS
(Contractor, subcontractor or public body)

and that all mechanics and apprentices, teamsters, chauffeurs and laborers employed on said project have been paid in accordance with wages determined under provisions of sections twenty-six and twenty-seven of chapter one hundred and forty nine of the General Laws.

Signature



Title

Payroll Administrator

MASSACHUSETTS WEEKLY CERTIFIED PAYROLL REPORT FORM



Company's Name: Fernandes Masonry, Inc.		Address: 1031 Phillips Rd. New Bedford, MA		Phone No.: 508-998-2121		Payroll No.: 6													
Employer's Signature: <i>Vera Vard</i>		Title: Payroll Administrator		Contract No.:		Work Week Ending: 2/25/2017													
Awarding Authority's Name: Town of Leicester		Public Works Project Name: Leicester Fire & EMS		Public Works Project Location: 3 Paxton St. Leicester, MA		Min. Wage Rate Sheet No.:													
General / Prime Contractor's Name: Builders Systems		Subcontractor's Name: Fernandes Masonry, Inc.		Employer's Hourly Fringe Benefit Contributions															
Employee Name & Complete Address	Employee is OSHA 10 Certified (?)	Work Classification:	Appr. Rate (%)	Hours							Project Hours (A) All Other Hours	Hourly Base Wage (B)	Health & Welfare Insurance (C)	ERISA Pension Plan (D)	Supp. Unemp. (E)	Total Hourly Prev. Wage (F) (B+C+D+E)	(A x F)		Check No. (H)
				Su.	Mo.	Tu.	We.	Th.	Fr.	Sa.							Total Gross Wages (G)	Direct Deposit	
Roy G. Benson 77 Cricket Drive Sturbridge, MA 01566	<input checked="" type="checkbox"/>	LABORER				8.00	7.50			15.50	40.100		12.650		52.75	817.63	817.63	Direct Deposit	
Roberto Carreiro 872 Bartlett Street New Bedford, MA 02745	<input checked="" type="checkbox"/>	BRICKLAYER		8.00	1.50	8.00	8.00	7.50		33.00	58.840		18.620		77.46	2556.18	2790.18	Direct Deposit	
Alvaro P. Correia 266 Moss Street S. Dartmouth, MA 02748-1723	<input checked="" type="checkbox"/>	BRICKLAYER		8.00	1.50	8.00	8.00	7.50		33.00	58.840		18.620		77.46	2556.18	2816.18	Direct Deposit	
Reginald J. Dagesse 44 Tampa Street Nashua, NH 03064	<input checked="" type="checkbox"/>	LABORER		4.00		2.00	5.00	5.50		16.50	40.100		12.650		52.75	870.38	2228.28	Direct Deposit	
Reginald J. Dagesse 44 Tampa Street Nashua, NH 03064	<input checked="" type="checkbox"/>	MACHINE OPERATOR		4.00	1.50	6.00	3.00	2.00		22.00	55.730		14.900		70.63	1165.40	2228.28	Direct Deposit	
Antonio M. Ferreira 249 Tinkham Street, 1st Floor New Bedford, MA 02745	<input checked="" type="checkbox"/>	LABORER		8.00	1.50	8.00	8.00	7.50		33.00	40.100		12.650		52.75	1740.75	1916.26	Direct Deposit	
Joseph Pereira 153 Hathaway Road Acushnet, MA 02743	<input checked="" type="checkbox"/>	LABORER		8.00	8.00	8.00	8.00	5.00		37.00	40.100		12.650		52.75	1951.75	1951.75	Direct Deposit	

NOTE: Pursuant to MGL Ch. 149 s.27B, every contractor and subcontractor is required to submit a "true and accurate" copy of their weekly payroll records directly to the awarding authority. Failure to comply may result in the commencement of a criminal action or the issuance of a civil citation.

Date received by awarding authority _____ / _____ / _____

MASSACHUSETTS WEEKLY CERTIFIED PAYROLL REPORT FORM



Company's Name: Fernandes Masonry, Inc.		Address: 1031 Phillips Rd. New Bedford, MA		Phone No.: 508-998-2121		Payroll No.: 6																		
Employer's Signature: <i>Vera Vaad</i>		Title: Payroll Administrator		Contract No.:		Work Week Ending: 2/25/2017																		
Awarding Authority's Name: Town of Leicester		Public Works Project Name: Leicester Fire & EMS		Public Works Project Location: 3 Paxton St. Leicester, MA		Min. Wage Rate Sheet No.:																		
General / Prime Contractor's Name: Builders Systems		Subcontractor's Name: Fernandes Masonry, Inc.		"Employer" Hourly Fringe Benefit Contributions																				
Employee Name & Complete Address	Employee is OSHA 10 Certified (?)	Work Classification:	Appr. Rate (%)	Hours							Hourly Base Wage (B)	Health & Welfare Insurance (C)	ERISA Pension Plan (D)	Supp. Unemp. (E)	Total Hourly Prev. Wage (F)	Project Gross Wages (A x F)		Check No. (H)						
				Su.	Mo.	Tu.	We.	Th.	Fr.	Sa.						All Other Hours	Total Gross Wages		Project Gross Wages					
Jordan A. Raposo 79 Katherine St. New Bedford, MA 02740	<input checked="" type="checkbox"/>	LABORER		8.00	1.50										40.100		12.650		52.75	501.13	501.13	67118		
Carlos M. Rodrigues 10 Bow Drive Acushnet, MA 02743-1733	<input checked="" type="checkbox"/>	BRICKLAYER		8.00	8.00	8.00	8.00	7.50							58.840		18.620		77.46	3059.67	3059.67	Latest Report		
	<input type="checkbox"/>																							
	<input type="checkbox"/>																							
	<input type="checkbox"/>																							
	<input type="checkbox"/>																							

NOTE: Pursuant to MGL Ch. 149 s.27B, every contractor and subcontractor is required to submit a "true and accurate" copy of their weekly payroll records directly to the awarding authority. Failure to comply may result in the commencement of a criminal action or the issuance of a civil citation.



RECEIVED MAR 20 2017

LETTER OF TRANSMITTAL

To: Town of Leicester 3 Washburn Square Leicester, MA 01524	Date: March 15, 2017
	Attn: Kevin J. Mizikar Town Administrator
	Via: Mail
	Re: Leicester Fire & EMS Leicester, MA

Transmittal Information			
Pages	Date	No.	Description
4	3/15/2017	1	Please find attached an original of the Certified Payroll report for week ending WE 3/4/2017

Remarks:

PLEASE FEEL FREE TO CALL WITH ANY QUESTIONS OR CONCERNS.

SINCERELY,

Molly Reid

Molly Reid
ADMINISTRATIVE ASSISTANT

1031 Phillips Road, New Bedford, MA 02745
Tel: 508.998.2121 Fax: 508.985.0003

www.fernandesmasonry.com
SDO PBE/DBE Certified

WEEKLY PAYROLL RECORDS REPORT & STATEMENT OF COMPLIANCE

In accordance with Massachusetts General Law c149, §27B, a true and accurate record must be kept of all persons employed on the public works project for which the enclosed rates have been provided. A Payroll Form has been printed on the reverse side of this page and includes all the information required to be kept by law. Every contractor or subcontractor is required to keep these records and preserve them for a period of three years from the date of completion of the contract.

In addition, every contractor and subcontractor is required to submit a copy of their weekly payroll records to the awarding authority. This is required to be done on a weekly basis. Once collected, the awarding authority is also required to preserve those records for three years.

In addition, each such contractor, subcontractor or public body shall furnish to the Department of Labor & Workforce Development/Division of Occupational Safety within fifteen days after completion of its portion of the work a statement, executed by the contractor, subcontractor or public body who supervises the payment of wages, in the following form:

STATEMENT OF COMPLIANCE

March 04, 2017

I, Vera Vadeboncoeur, Payroll Administrator
(Name of signatory party) (Title)

do hereby state:

That I pay or supervise the payment of the persons employed by

Fernandes Masonry Inc on the 1610-00 Leicester Fire and EMS
(Contractor, subcontractor or public body)

and that all mechanics and apprentices, teamsters, chauffeurs and laborers employed on said project have been paid in accordance with wages determined under provisions of sections twenty-six and twenty-seven of chapter one hundred and forty nine of the General Laws.

Signature 

Title Payroll Administrator

MASSACHUSETTS WEEKLY CERTIFIED PAYROLL REPORT FORM



Company's Name: Fernandes Masonry, Inc.		Address: 1031 Phillips Rd. New Bedford, MA		Phone No.: 508-998-2121	Payroll No.: 7															
Employer's Signature: <i>[Signature]</i>		Title: Payroll Administrator		Contract No.: 04-3377972	Work Week Ending: 3/4/2017															
Awarding Authority's Name: Town of Leicester		Public Works Project Name: Leicester Fire & EMS		Public Works Project Location: 3 Paxton St. Leicester, MA																
General / Prime Contractor's Name: Builders Systems		Subcontractor's Name: Fernandes Masonry, Inc.		"Employer" Hourly Fringe Benefit Contributions																
Employee Name & Complete Address	Employee is OSHA 10 Certified (?)	Work Classification:	Appr. Rate (%)	Worked							Hours	Project Hours (A) All Other Hours	Hourly Base Wage (B)	Health & Welfare Insurance (C)	ERISA Pension/Plan (D)	Supp. Unemp. (E)	Total Hourly Prev. Wage (F)	(A x F)		Check No. (H)
				Su.	Mo.	Tu.	We.	Th.	Fr.	Sa.								Total Gross Wages (G)	Direct Deposit	
Roy G. Benson 77 Cricket Drive Sturbridge, MA 01566	<input checked="" type="checkbox"/>	LABORER			5.50	8.00						13.50	40.100		12.650		52.75	712.13	1300.13	Direct Deposit
Roberto Carreiro 872 Bartlett Street New Bedford, MA 02745	<input checked="" type="checkbox"/>	BRICKLAYER			8.00	8.00						16.00	58.840		18.620		77.46	1239.36	1527.36	DD/67178
Alvaro P. Correia 266 Moss Street S. Dartmouth, MA 02748-1723	<input checked="" type="checkbox"/>	BRICKLAYER			8.00	8.00						16.00	58.840		18.620		77.46	1239.36	3112.08	Direct Deposit
Alvaro P. Correia 266 Moss Street S. Dartmouth, MA 02748-1723	<input checked="" type="checkbox"/>	BRICKLAYER/NEW RATE					8.00					8.00	59.41		18.620		78.03	624.24	3112.08	Direct Deposit
Reginald J. Dagesse 44 Tampa Street Nashua, NH 03064	<input checked="" type="checkbox"/>	LABORER			2.00	5.00	4.00					11.00	40.100		12.650		52.75	580.25	1567.50	Direct Deposit
Reginald J. Dagesse 44 Tampa Street Nashua, NH 03064	<input checked="" type="checkbox"/>	MACHINE OPERATOR			6.00	3.00	2.50					11.50	55.730		14.900		70.63	812.25	1567.50	Direct Deposit
Antonio M. Ferreira 249 Tinkham Street, 1st Floor New Bedford, MA 02745	<input checked="" type="checkbox"/>	LABORER			8.00	8.00	8.00					24.00	40.100		12.650		52.75	1266.00	2110.00	Direct Deposit

NOTE: Pursuant to MGL Ch. 149 s.27B, every contractor and subcontractor is required to submit a "true and accurate" copy of their weekly payroll records directly to the awarding authority. Failure to comply may result in the commencement of a criminal action or the issuance of a civil citation.

MASSACHUSETTS WEEKLY CERTIFIED PAYROLL REPORT FORM



Company's Name: Fernandes Masonry, Inc.	Address: 1031 Phillips Rd. New Bedford, MA	Phone No.:	508-998-2121	Payroll No.:	7
Employer's Signature: <i>Uma Vaal</i>	Title: Payroll Administrator	Contract No.:	04-3377972	Work Week Ending:	3/4/2017
Awarding Authority's Name: Town of Leicester	Public Works Project Name: Leicester Fire & EMS	Public Works Project Location:	3 Paxton St. Leicester, MA	Min. Wage Rate Sheet No.:	
General / Prime Contractor's Name: Builders Systems	Subcontractor's Name: Fernandes Masonry, Inc.	"Employer": Hourly Fringe Benefit Contributions			

Employee Name & Complete Address	Employee is OSHA 10 Certified (?)	Work Classification:	Appr. Rate (%)	Worked							Project Hours (A) All Other Hours	Hourly Base Wage (B)	Health & Welfare Insurance (C)	ERISA Pension Plan (D)	Supp. Unemp. (E)	Total Hourly Prev. Wage (F)	Project Gross Wages (G)		Check No. (H)	
				Su.	Mo.	Tu.	We.	Th.	Fr.	Sa.							Total Gross Wages	Direct Expense		
Joseph Pereira 153 Hathaway Road Acushnet, MA 02743	<input checked="" type="checkbox"/>	LABORER		8.00	8.00	8.00	8.00				24.00	40.100		12.650		52.75	1266.00		1266.00	
Carlos M. Rodrigues 10 Bow Drive Acushnet, MA 02743-1733	<input checked="" type="checkbox"/>	BRICKLAYER		8.00							16.00	58.840		18.620		77.46	619.68		2110.00	
	<input type="checkbox"/>																			
	<input type="checkbox"/>																			
	<input type="checkbox"/>																			
	<input type="checkbox"/>																			
	<input type="checkbox"/>																			

NOTE: Pursuant to MGL Ch. 149 s.27B, every contractor and subcontractor is required to submit a "true and accurate" copy of their weekly payroll records directly to the awarding authority. Failure to comply may result in the commencement of a criminal action or the issuance of a civil citation.



RECEIVED MAR 27 2017

LETTER OF TRANSMITTAL

To: Town of Leicester 3 Washburn Square Leicester, MA 01524	Date: March 22, 2017
	Attn: Kevin J. Mizikar Town Administrator
	Via: Mail
	Re: Leicester Fire & EMS Leicester, MA

Transmittal Information			
Pages	Date	No.	Description
3	3/22/2017	1	Please find attached an original of the Certified Payroll report for week ending WE 3/11/2017

Remarks:

PLEASE FEEL FREE TO CALL WITH ANY QUESTIONS OR CONCERNS.

SINCERELY,

Molly Reid

Molly Reid
ADMINISTRATIVE ASSISTANT

1031 Phillips Road, New Bedford, MA 02745
Tel: 508.998.2121 Fax: 508.985.0003

www.fernandesmasonry.com
SDO PBE/DBE Certified

WEEKLY PAYROLL RECORDS REPORT & STATEMENT OF COMPLIANCE

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In addition, each such contractor, subcontractor or public body shall furnish to the Department of Labor & Workforce Development/Division of Occupational Safety within fifteen days after completion of its portion of the work a statement, executed by the contractor, subcontractor or public body who supervises the payment of wages, in the following form:

STATEMENT OF COMPLIANCE

March 11, 2017

I, Vera Vadeboncoeur, Payroll Administrator
(Name of signatory party) (Title)

do hereby state:

That I pay or supervise the payment of the persons employed by

Fernandes Masonry Inc on the 1610-00 Leicester Fire and EMS
(Contractor, subcontractor or public body)

and that all mechanics and apprentices, teamsters, chauffeurs and laborers employed on said project have been paid in accordance with wages determined under provisions of sections twenty-six and twenty-seven of chapter one hundred and forty nine of the General Laws.

Signature

Vera Vadeboncoeur

Title

Payroll Administrator

MASSACHUSETTS WEEKLY CERTIFIED PAYROLL REPORT FORM



Company's Name: Fernandes Masonry, Inc.		Address: 1031 Phillips Rd. New Bedford, MA		Phone No.: 508-998-2121		Payroll No.: 8																		
Employer's Signature: <i>Van Vack</i>		Title: Payroll Administrator		Contract No.: 04-3377972		Work Week Ending: 3/11/2017																		
Awarding Authority's Name: Town of Leicester		Public Works Project Name: Leicester Fire & EMS		Public Works Project Location: 3 Paxton St. Leicester, MA		Min. Wage Rate Sheet No.:																		
General / Prime Contractor's Name: Builders Systems		Subcontractor's Name: Fernandes Masonry, Inc.		*Employer's Hourly Fringe Benefit Contributions																				
Employee Name & Complete Address	Employee is OSHA 10 Certified (?)	Work Classification:	Appr. Rate (%)	Worked							Project Hours (A) All Other Hours	Hourly Base Wage (B)	Health & Welfare Insurance (C)	ERISA Pension Plan (D)	Supp. Unemp. (E)	Total Hourly Prev. Wage (F)	Project Gross Wages (A x F)		Check No. (H)					
				Su.	Mo.	Tu.	We.	Th.	Fr.	Sa.							Su.	Total Gross Wages		Wages (G)				
Jeffrey V. Pacheco 44 Danis St., Apt. B Fall River, MA 02720	<input checked="" type="checkbox"/>	LABORER							8.00								40.100	12.650	52.75	422.00	1546.80	67205		
	<input type="checkbox"/>																							
	<input type="checkbox"/>																							
	<input type="checkbox"/>																							
	<input type="checkbox"/>																							
	<input type="checkbox"/>																							
	<input type="checkbox"/>																							

NOTE: Pursuant to MGL Ch. 149 s.27B, every contractor and subcontractor is required to submit a "true and accurate" copy of their weekly payroll records directly to the awarding authority. Failure to comply may result in the commencement of a criminal action or the issuance of a civil citation.



RECEIVED APR 03 2017

LETTER OF TRANSMITTAL

To: Town of Leicester 3 Washburn Square Leicester, MA 01524	Date: March 29, 2017
	Attn: Kevin J. Mizikar Town Administrator
	Via: Mail
	Re: Leicester Fire & EMS Leicester, MA

Transmittal Information			
Pages	Date	No.	Description
3	3/29/2017	1	Please find attached an original of the Certified Payroll report for week ending WE 3/18/2017

Remarks:

PLEASE FEEL FREE TO CALL WITH ANY QUESTIONS OR CONCERNS.

SINCERELY,

Molly Reid

Molly Reid
ADMINISTRATIVE ASSISTANT

1031 Phillips Road, New Bedford, MA 02745
Tel: 508.998.2121 Fax: 508.985.0003

www.fernandesmasonry.com
SDO PBE/DBE Certified

WEEKLY PAYROLL RECORDS REPORT & STATEMENT OF COMPLIANCE

In accordance with Massachusetts General Law c149, §27B, a true and accurate record must be kept of all persons employed on the public works project for which the enclosed rates have been provided. A Payroll Form has been printed on the reverse side of this page and includes all the information required to be kept by law. Every contractor or subcontractor is required to keep these records and preserve them for a period of three years from the date of completion of the contract.

In addition, every contractor and subcontractor is required to submit a copy of their weekly payroll records to the awarding authority. This is required to be done on a weekly basis. Once collected, the awarding authority is also required to preserve those records for three years.

in addition, each such contractor, subcontractor or public body shall furnish to the Department of Labor & Workforce Development/Division of Occupational Safety within fifteen days after completion of its portion of the work a statement, executed by the contractor, subcontractor or public body who supervises the payment of wages, in the following form:

STATEMENT OF COMPLIANCE

March 18, 2017

I, Vera Vadeboncoeur, Payroll Administrator
(Name of signatory party) (Title)

do hereby state:

That I pay or supervise the payment of the persons employed by

Fernandes Masonry Inc on the 1610-00 Leicester Fire and EMS
(Contractor, subcontractor or public body)

and that all mechanics and apprentices, teamsters, chauffeurs and laborers employed on said project have been paid in accordance with wages determined under provisions of sections twenty-six and twenty-seven of chapter one hundred and forty nine of the General Laws.

Signature

Vera Vadeboncoeur

Title

Payroll Administrator

MASSACHUSETTS WEEKLY CERTIFIED PAYROLL REPORT FORM



Company's Name: Fernandes Masonry, Inc.		Address: 1031 Phillips Rd. New Bedford, MA		Phone No.: 508-998-2121		Payroll No.: 9	
Employer's Signature: <i>Vera Vard</i>		Title: Payroll Administrator		Contract No.: 04-3377972		Work Week Ending: 3/18/2017	
Awarding Authority's Name: Town of Leicester		Public Works Project Name: Leicester Fire & EMS		Public Works Project Location: 3 Paxton St. Leicester, MA		Min. Wage Rate Sheet No.:	
General / Prime Contractor's Name: Builders Systems		Subcontractor's Name: Fernandes Masonry, Inc.		"Employer" Hourly Fringe Benefit Contributions			

Employee Name & Complete Address	Employee is OSHA 10 Certified (?)	Work Classification:	Appr. Rate (%)	Worked							Hours		Hourly Base Wage (B)	Health & Welfare Insurance (C)	ERISA Pension Plan (D)	Supp. Unemp. (E)	Total Hourly Prev. Wage (F)	(A x F)		Check No. (H)		
				Su.	Mo.	Tu.	We.	Th.	Fr.	Sa.	Sa.	Project Hours (A)						Total Gross Wages (G)	Direct Deposit			
Alvaro P. Correia 266 Moss Street. S. Dartmouth, MA 02748-1723	<input checked="" type="checkbox"/>	BRICKLAYER					8.00	8.00				16.00			18.620		78.03	1248.48	1815.68			
Reginald J. Dagesse 44 Tampa Street Nashua, NH 03064	<input checked="" type="checkbox"/>	LABORER					4.00	4.00				8.00			12.650		52.75	422.00	1267.04			
Reginald J. Dagesse 44 Tampa Street Nashua, NH 03064	<input checked="" type="checkbox"/>	MACHINE OPERATOR					4.00	4.00				8.00			14.900		70.63	565.04	1267.04			
Joseph Pereira 153 Hathaway Road Acushnet, MA 02743	<input checked="" type="checkbox"/>	LABORER						8.00				8.00			12.650		52.75	422.00	1688.00			
	<input type="checkbox"/>																					
	<input type="checkbox"/>																					
	<input type="checkbox"/>																					

NOTE: Pursuant to MGL Ch. 149 s.27B, every contractor and subcontractor is required to submit a "true and accurate" copy of their weekly payroll records directly to the awarding authority. Failure to comply may result in the commencement of a criminal action or the issuance of a civil citation.