

DUES CHECK OFF FORM FOR LABORERS LOCAL 397

GRANITE CITY / EDWARDSVILLE

8/1/2020

CONTRACTOR NAME:

SIGNATURE OF

SIBA CONTRACTOR :

NAME OF EMPLOYEE

SOCIAL SECURITY NUMBER

GROSS WAGES

COLUMN 1

GROSS WAGES X 3%

COLUMN 2

\$.50 X HOURS WORKED

COLUMN 3

\$.10 X HRS.

1

2

3

4

5

6

7

8

9

10

TOTAL

REMIT ALL PAYMENTS PAYABLE TO LABORERS LOCAL 397/ 518 HENRY STREET, EDWARDSVILLE, IL. 62025
THIS REPORT FOR THE PERIOD THRU

COLUMN 1- THREE PERCENT{3%} OF EMPLOYEES GROSS PAY FOR WORKING DUES

COLUMN 2- FIFTY CENTS {\$0.50}PER HOURS WORKED BE EMPLOYEES FOR SUPPLEMENTAL DUES

COLUMN 3- TEN CENTS {\$0.10}PER HOURS WORKED BY EMPLOYEES FOR LABORERS LOCAL 397 PAC

DUES CHECK OFF FORM FOR LABORERS LOCAL 397

GRANITE CITY / EDWARDSVILLE

8/1/2020

CONTRACTOR NAME:

AUTHORIZED SIGNATURE OF NON-SIBA CONTRACTOR:

NAME OF EMPLOYEE

SOCIAL SECURITY NUMBER

GROSS WAGES

COLUMN 1

GROSS WAGES X 3%

COLUMN 2

\$.60 X HOURS WORKED

COLUMN 3

\$.10 X HRS.

1

2

3

4

5

6

7

8

9

10

TOTAL

REMIT ALL PAYMENTS PAYABLE TO LABORERS LOCAL 397/ 518 HENRY STREET, EDWARDSVILLE, IL. 62025

THIS REPORT FOR THE PERIOD THRU

COLUMN 1- THREE PERCENT{3%} OF EMPLOYEES GROSS PAY FOR WORKING DUES

COLUMN2- SIXTY CENTS {\$.60}PER HOURS WORKED BY EMPLOYEES FOR SUPPLEMENTAL DUES

COLUMN 3- TEN CENTS {\$0.10}PER HOURS WORKED BY EMPLOYEES FOR LABORERS LOCAL 397 PAC