

# CITY OF WASHINGTON, ILLINOIS City Council Agenda Communication

Meeting Date: May 19, 2025

**Prepared By:** Interim Police Chief Jeff Stevens

**Agenda Item:** Washington Police Evidence Storage Pay Request #2

**Explanation**: The City awarded construction of the Evidence Building to PJ Hoerr, Inc. for a

price of \$2,337,400. In April, Council authorized payment #1 in the amount of \$146,799.54. The second payment for completed work is now due in the amount of \$340,857.67. The certified application for payment is attached and

verified by Nathan Custer of Dewberry, the City's architect and project

management company.

Construction is on, or slightly ahead of the project plan.

**Fiscal Impact**: Payment as requested is within the project plan and budget.

**Action Requested**: Approval of payment in the amount of \$340,857.67.

Date Prepared: 5/13/2025



**Peoria Office:** 107 N. Commerce Place, Peoria, IL 61604 Phone: 309 / 68 \$67 Fax: 309 / 68 \$9556

**Bloomington/Normal Office:** 117 Merle Lane, Normal, IL 61761 Phone: 309 / 888-9567 Fax: 309 / 888-9556

May 02, 2025

CITY OF WASHINGTON ATTN: MIKE MCCOY 301 Walnut Street Washington, IL 61571

Re: WASHINGTON POLICE EVIDENCE STORAGE

115 W Jefferson Street Washington, IL 61571 PJHI Project No. 11192

Application No. 2; Invoice No. C25171

Dear Mike Mccoy:

Enclosed is a copy of our current billing for the WASHINGTON POLICE EVIDENCE STORAGE project listed above. Also enclosed is our waiver of lien for the net amount of the application. Please process for payment.

Feel free to call upon the Project Manager, Charlie Waibel, or myself should you have any questions or require any further information.

Very truly,

odi Summer, Project Coordinator

P. J. HOERR, INC.

**Enclosures:** Billing Application #2 - 0 copy

Waiver of Lien

#### APPLICATION AND CERTIFICATE FOR PAYMENT Application No. 2 **Invoice #: C25171** Copies: Distribution to: To Owner: CITY OF WASHINGTON Project: WASHINGTON POLICE EVIDENCE STORAGE Site: 115 W Jefferson Street 301 Walnut Street Period To: 4/30/2025 **Construction Manager** Washington IL 61571 Washington, IL 61571 Architect Owner From Contractor: P. J. HOERR, INC. PJHI Project No.: 11192 Charlie Waibel, Project Manager Mike Mccoy Contract Date: 107 N. Commerce Place Peoria, IL 61604 Contract For: CONTRACTOR'S APPLICATION FOR PAYMENT The undersigned Contractor certifies that to the best of the Contractor's knowledge, information, and belief, the work covered by this Application for Payment has been Application is made for payment, as shown below, in connection with the Contract. completed in accordance with the Contract Documents. That all amounts have been paid Continuation Sheet is attached. by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due. 1. Original Contract Sum \$ 2,337,400.00 CONTRACTOR: P. J. HOERR. INC. \$(50,703.50) 2. Net Change By Change Order ..... 3. Contract Sum To Date ..... \$ 2,286,696.50 Date: 05/01/2025 \$ 541.841.34 Charlie Waibel, Project Manager 5. Retainage: State of: Illinois County of: Peoria 10.0% of Completed Work \$ 47,875.33 Subscribed and sworn to before me this 1st day of May, 2025 of Stored Material 10.0% \$ 6,308.80 "OFFICIAL SEAL" Notary Public: JODI SUMMER \$ 54,184,13 Notary Public, State of Illinois Total Retainage ..... My Commission Expires July 10, 2027 My Commission expires: July 10, 2027 6. Total Earned Less Retainage ..... \$ 487,657.21 ARCHITECT'S CERTIFICATE FOR PAYMENT In accordance with the Contract Documents, based on on-site observations and the data comprising 7. Less Previous Certificates For Payment . . . . . . . . \$ 146,799.54 the above application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information, and belief, the Work has progressed as indicated, the quality of the Work is in accordance 8. Current Payment Due ..... with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED. \$ 340,857.67 9. Balance To Finish, Plus Retainage ..... \$ 1,799,039.29 \$340,857.67 AMOUNT CERTIFIED (Attach explanation if amount certified differs from the amount applied. Initial all figures on this Application and on the Continuation Sheet that are changed to conform with the amount certified.) Additions CHANGE ORDER SUMMARY Deductions Total changes approved ARCHITECT / OWNERS' REPRESENTATIVE: \$ 0.00 \$(50,703.50) in previous months by Owner

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment, and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

Application and Certification for Payment, containing

Contractor's signed certification is attached.

Invoice #: C25171

In tabulations below, amounts are stated to the nearest dollar.

Use Column I on Contracts where variable retainage for line items may apply.

Application No.: 2

Application Date: 4/29/2025

To: 4/30/2025

**Architect's Project No.:** 

PJHI Project No.: 11192

A	В	C	D	E	F	G		н	I
Item	Description of Work	on of Work Scheduled		Work Completed		Total Completed	9/	Balance	
No.	Description of Work	Value	From Previous Application (D+E)	This Period In Place	Presently Stored (Not in D or E)	and Stored To Date (D+E+F)	% (G/C)	To Finish (C-G)	Retainage
	WASHINGTON POLICE EVIDENCE STORAGE								
	General Conditions								
01005	Mobilization	9,800.00	9,800.00			9,800.00	100.0%	0.00	980.00
01010	Project Management	32,500.00	8,000.00	5,000.00		13,000.00	40.0%	19,500.00	1,300.00
01015	Site Superintendent	60,010.00	10,000.00	10,000.00		20,000.00	33.3%	40,010.00	2,000.00
01020	Building & Civil Layout	7,200.00	5,500.00			5,500.00	76.4%	1,700.00	550.00
01025	Temp Technology Fees	1,855.00	350.00	350.00		700.00	37.7%	1,155.00	70.00
01030	Temporary Facilities	6,200.00	1,050.00	1,050.00		2,100.00	33.9%	4,100.00	210.00
01035	Temporary Toilets	1,050.00	175.00	175.00		350.00	33.3%	700.00	35.00
01040	General Cleaning	12,800.00	500.00	750.00		1,250.00	9.8%	11,550.00	125.00
01045	Dumpsters	3,250.00	550.00	550.00		1,100.00	33.8%	2,150.00	110.00
01050	Final Clean	1,300.00	0.00			0.00	0.0%	1,300.00	0.00
	Insurance	-							
01505	Builders Risk Insurance	6,800.00	6,800.00			6,800.00	100.0%	0.00	680.00
01510	General Liability Insurance	3,120.00	3,120.00			3,120.00	100.0%	0.00	312.00
	Building Concrete								
03005	Wall Footing Material	8,200.00	5,000.00	3,200.00		8,200.00	100.0%	0.00	820.00
03010	Wall Footing Labor	12,250.00	7,500.00	4,750.00		12,250.00	100.0%	0.00	1,225.00
03015	Foundation Wall Material	17,789.00	5,929.00	11,860.00		17,789.00	100.0%	0.00	1,778.90
03020	Foundation Wall Labor	27,351.00	2,500.00	24,851.00		27,351.00	100.0%	0.00	2,735.10
03025	Rebar/Mesh Material	10,583.00	5,000.00	3,000.00		8,000.00	75.6%	2,583.00	800.00
03030	Rebar/Mesh Labor	17,726.00	0.00	14,000.00		14,000.00	79.0%	3,726.00	1,400.00
03035	Slab on Grade Material	13,462.00	0.00			0.00	0.0%	13,462.00	0.00
03040	Slab on Grade Labor	13,762.00	0.00			0.00	0.0%	13,762.00	0.00
		267,008.00	71,774.00	79,536.00	0.00	151,310.00	56.7%	115,698.00	15,131.00

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Application Date: 4/29/2025

To: 4/30/2025

Architect's Project No.:

PJHI Project No.: 11192

A	В	C	D	E	F	G		н	I
Item	D	Scheduled	Work Completed		Materials	Total		Balance	
No.	Description of Work		From Previous Application (D+E)	This Period In Place	Presently Stored (Not in D or E)	Completed and Stored To Date (D+E+F)	% (G/C)	To Finish (C-G)	Retainage
03045	Floor Polishing Material	2,200.00	0.00	***	(NOT IN D OF E)	0.00	0.0%	2,200.00	0.00
03050			0.00			0.00	0.0%		0.00
	Floor Polishing Labor	14,000.00	0.00				0.0%	14,000.00	0.00
	Masonry								
04005	Summit	337,200.00	0.00	148,600.00		148,600.00	44.1%	188,600.00	14,860.00
	Structural/Misc. Steel	-							
05005	Hanley Steel	49,962.00	0.00			0.00	0.0%	49,962.00	0.00
05010	Van Buskirk Steel	32,200.00	0.00			0.00	0.0%	32,200.00	0.00
	Rough & Finish Carpentry	-							
06005	Wood Blocking Material	1,400.00	0.00			0.00	0.0%	1,400.00	0.00
06010	Wood Blocking Labor	2,878.00	0.00			0.00	0.0%	2,878.00	0.00
06015	Casework Material	6,445.00	0.00			0.00	0.0%	6,445.00	0.00
06020	Casework Labor	3,086.00	0.00			0.00	0.0%	3,086.00	0.00
	Thermal & Moisture Protection								
07005	Roofing - Kreiling	66,609.00	0.00			0.00	0.0%	66,609.00	0.00
	Openings	-							
08005	Doors, Frames, and Hardware Material	53,025.00	0.00	33,581.91		33,581.91	63.3%	19,443.09	3,358.19
08010	Doors, Frames, and Hardware Labor	16,949.00	0.00			0.00	0.0%	16,949.00	0.00
08015	Bulletproof Transaction Window & Door Material	12,259.00	0.00			0.00	0.0%	12,259.00	0.00
08020	Bulletproof Transaction Window & Door Labor	2,763.00	0.00			0.00	0.0%	2,763.00	0.00
08025	Sectional Doors - Wayne Dalton	35,530.00	0.00			0.00	0.0%	35,530.00	0.00
							2<00:		
		903,514.00	71,774.00	261,717.91	0.00	333,491.91	36.9%	570,022.09	33,349.19

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Use Column I on Contracts where variable retainage for line items may apply.

Application No.: 2

Application Date: 4/29/2025

To: 4/30/2025

Architect's Project No.:

PJHI Project No.: 11192

A	В	С	D	E	F	G		H	I
Item No.	Description of Work	Scheduled	Work Completed		Materials	Total Completed	0/	Balance	
	Description of Work	Value	From Previous Application (D+E)	This Period In Place	Presently Stored (Not in D or E)	and Stored To Date (D+E+F)	% (G/C)	To Finish (C-G)	Retainage
	Finishes								
09005	Studs/Drywall/ACT - Allied	14,965.00	0.00			0.00	0.0%	14,965.00	0.00
09010	Painting - Dragoo	25,400.00	0.00			0.00	0.0%	25,400.00	0.00
	Specialties								
10005	Signage	1,235.00	0.00			0.00	0.0%	1,235.00	0.00
10010	Lockers	282.00	0.00			0.00	0.0%	282.00	0.00
10015	Toilet Accessories	2,406.00	0.00			0.00	0.0%	2,406.00	0.00
10020	Fire Extinguishers	303.00	0.00			0.00	0.0%	303.00	0.00
10025	Evidence Storage Lockers - Bradford Systems	72,058.00	0.00			0.00	0.0%	72,058.00	0.00
	Equipment								
11005	Lab Equipment Material	5,950.00	0.00			0.00	0.0%	5,950.00	0.00
11010	Lab Equipment Labor /	977.00	0.00			0.00	0.0%	977.00	0.00
	Fire Protection								
21005	Twin Lakes	54,850.00	0.00			0.00	0.0%	54,850.00	0.00
	Plumbing								
22005	Site Water & Site Sanitary - Dillon	227,825.00	0.00			0.00	0.0%	227,825.00	0.00
	HVAC (								
23005	JA Fritch	96,400.00	0.00	2,400.00	28,088.00	30,488.00	31.6%	65,912.00	3,048.80
	Electrical								
26005	Laser Electric, Inc.	505,150.00	0.00	17,000.00	35,000.00	52,000.00	10.3%	453,150.00	5,200.00
		1,911,315.00	71,774.00	281,117.91	63,088.00	415,979.91	21.8%	1,495,335.09	41,597.99

## **CONTINUATION SHEET**

Application and Certification for Payment, containing

Contractor's signed certification is attached.

In tabulations below, amounts are stated to the nearest dollar.

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Application Date: 4/29/2025

To: 4/30/2025

Architect's Project No.:

PJHI Project No.: 11192

A	В	C	D	${f E}$	F	G		H	I
Item	Description of Work	Scheduled	Work Completed		Materials	Total Completed	%	Balance	
No.	Description of Work	Value	From Previous	This Period In Place	Presently Stored	and Stored To Date	(G/C)	To Finish	Retainage
		value	Application (D+E)	In Flace	(Not in D or E)	(D+E+F)	(G/C)	(C-G)	
	Earthwork/Storm Sewer								
31005	Hein Construction, Inc.	120,957.00	83,360.00	16,100.00		99,460.00	82.2%	21,497.00	9,946.00
	Exterior Improvements								
32005	Asphalt - TCA	46,985.00	0.00			0.00	0.0%	46,985.00	0.00
	Site Concrete - PJH								
32205	Pavement Material	23,397.00	0.00			0.00	0.0%	23,397.00	0.00
32210	Pavement Labor	19,694.00	0.00			0.00	0.0%	19,694.00	0.00
32215	Sidewalk Material	4,611.00	0.00			0.00	0.0%	4,611.00	0.00
32220	Sidewalk Labor	8,517.00	0.00			0.00	0.0%	8,517.00	0.00
32225	Generator Pad Material	2,318.00	0.00			0.00	0.0%	2,318.00	0.00
32230	Generator Pad Labor	1,006.00	0.00			0.00	0.0%	1,006.00	0.00
32235	Bollards	11,123.00	0.00			0.00	0.0%	11,123.00	0.00
32500	Landscaping - FW	20,000.00	0.00			0.00	0.0%	20,000.00	0.00
32700	Fence	4,427.00	0.00			0.00	0.0%	4,427.00	0.00
40000	PJH OH&P	112,346.50	7,976.60	18,424.83		26,401.43	23.5%	85,945.07	2,640.14
70000	Original Value Engineering	62,314.00	62,314.00			62,314.00	100.0%	0.00	6,231.40
	Change Orders								
	OCO 01 -\$50,703.50 (PJH, Hanley, Laser)								
80010	Value Enginnering credit	(62,314.00)	(62,314.00)			(62,314.00)	100.0%	0.00	(6,231.40
		2,286,696.50	163,110.60	315,642.74	63,088.00	541,841.34	23.7%	1,744,855.16	54,184.13



#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/27/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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PRODUCER Arthur J. Gallagher Risk Manage	ment Services, LLC	CONTACT Richelle Lorenz PHONE (A/C, No, Ext): 309-407-3075  FAX (A/C, No):					
7131 N. Knoxville Ave. Suite 1		E-MAIL ADDRESS: Richelle_Lorenz@ajg.com	[ [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [				
Peoria IL 61614		INSURER(S) AFFORDING COVERAGE	NAIC #				
		INSURER A: Selective Insurance Company of Ame	rica 12572				
INSURED	S&SBUIL-01	INSURER B: Farmington Casualty Company	41483				
S & S Builders Hardware Co 917 Pioneer Parkway		INSURER C:					
Peoria IL 61615		INSURER D:					
		INSURER E :					
		INSURER F:					
COVERAGES	CERTIFICATE NUMBER: 1991706995	5 REVISION NUMBER:					

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

ISR TR	TYPE OF INSURANCE	TYPE OF INSURANCE ADDL SUBR INSD WVD POLICY NUMBER		LICY NUMBER POLICY (MM/DD/	EFF POLICY (YYY) (MM/DD/	Y EXP YYYYY)	LIMITS
Α	X COMMERCIAL GENERAL LIABILITY		S 2416340	1/1/2	25 1/1/2	LAGITOCOUNTERIOL	\$ 1,000,000
	CLAIMS-MADE X OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence	e) \$100,000
						MED EXP (Any one persor	n) \$ 5,000
						PERSONAL & ADV INJUR	\$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$ 2,000,000
	POLICY X PRO-					PRODUCTS - COMP/OP A	AGG \$2,000,000
	OTHER:					•	\$
Α.	AUTOMOBILE LIABILITY		S 2416340	1/1/2	25 1/1/2	026 COMBINED SINGLE LIMIT	\$ 1,000,000
	X ANY AUTO					BODILY INJURY (Per pers	son) \$
	OWNED SCHEDULED AUTOS ONLY AUTOS					BODILY INJURY (Per acci	ident) \$
	X HIRED X NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$
							\$
4	X UMBRELLA LIAB X OCCUR		S 2416340	1/1/2	25 1/1/2	026 EACH OCCURRENCE	\$ 5,000,000
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$ 5,000,000
	DED X RETENTION \$ 0						\$
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		UBA733673A	1/1/2	25 1/1/2	026 X PER OF	TH- ?
	ANYPROPRIETOR/PARTNER/EXECUTIVE [N]	N/A				E.L. EACH ACCIDENT	\$ 1,000,000
	(Mandatory in NH)	N/A				E.L. DISEASE - EA EMPLO	OYEE \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY L	IMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

PROJECT: #11192 WASHINGTON POLICE DEPARTMENT EVIDENCE STORAGE DEPT.

RE: Material stored at S & S Builders Hardware Co. at 917 W. Pioneer Parkway, Peoria, IL, for the project known as, #11192 WASHINGTON POLICE DEPARTMENT EVIDENCE STORAGE DEPT., in the amount of \$53,025.00

P.J. Hoerr, Inc., City of Washington, Dewberry Architects, Inc. and Owner are named as additional insureds under the General Liability, Automobile, Umbrella and Pollution Liability on a primary and non-contributory basis. A Waiver of Subrogation is awarded to P.J. Hoerr, Inc., City of Washington, Dewberry Architects, Inc. and Owner under the General Liability and Worker's Compensation.

CERTIFICATE HOLDER	CANCELLATION
PJ Hoerr, Inc. 107 N. Commerce Place	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Peoria IL 61604	authorized representative

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# Contracting, Installation, Service and Repair General Liability Extended ElitePac® Endorsement

COMMERCIAL GENERAL LIABILITY
CG 79 88 01 16

## THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

#### 1. BLANKET ADDITIONAL INSUREDS

#### a. Ongoing Operations

SECTION II — WHO IS AN INSURED is amended to include as an additional insured any person or organization you have agreed in a written contract, written agreement, or written permit to add as an additional insured on your policy, but only with respect to liability arising out of your ongoing operations performed under that contract, agreement, or permit when that contract, agreement, or permit requires the additional insured be added with respect to liability arising out of your ongoing operations. If the written contract, written agreement, or written permit does not require that the additional insured be added with respect to liability arising out of your ongoing operations, then SECTION II — WHO IS AN INSURED is amended to include as an additional insured any person or organization you have agreed in a written contract, written agreement, or written permit to add as an additional insured on your policy, but only with respect to "bodily injury", "property damage" or "personal and advertising injury" caused in whole or in part by your ongoing operations performed under that contract, agreement, or permit.

#### b. Completed Operations

SECTION II — WHO IS AN INSURED is amended to include as an additional insured any person or organization you have agreed in a written contract, written agreement, or written permit to add as an additional insured on your policy, but only with respect to their liability arising out of "your work" performed under that contract, agreement, or permit and included in the "products-completed operations hazard" when that contract, agreement, or permit requires the additional insured be added with respect to liability arising out of "your work" performed under that contract, agreement, or permit and included in the "products-completed

operations hazard". If the written contract, written agreement, or written permit does not require that the additional insured be added with respect to liability arising out of "your work" performed under that contract, agreement, or permit and included in the "products-completed operations hazard", then SECTION II - WHO IS AN INSURED is amended to include as an additional insured any person or organization you have agreed in a written contract, written agreement, or written permit to add as an additional insured on your policy, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by "your work" performed under that contract, agreement, or permit and included in the "products-completed operations hazard".

c. The coverages provided in Paragraphs a. and b. do not apply unless the written contract or written agreement has been executed (executed means signed by the named insured) or written permit issued prior to the "bodily injury", "property damage" or "personal and advertising injury".

#### d. Exclusions

(1) With respect to the insurance afforded to additional insureds under a. Ongoing Operations the following is added to 2. Exclusions under SECTION I — COVERAGE A — BODILY INJURY AND PROPERTY DAMAGE LIABILITY:

This insurance does not apply to "bodily injury", "property damage", or "personal and advertising injury" occurring after:

(a) All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the site of the covered operations has been completed; or

- (b) That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.
- (2) With respect to the insurance afforded to these additional insureds under a. Ongoing Operations and b. Completed Operations, the following is added to 2. Exclusions under SECTION I — COVERAGE A — BODILY INJURY AND PROPERTY DAM-AGE LIABILITY:

This insurance does not apply to:

"Bodily injury", "property damage", or "personal and advertising injury" arising out of the rendering of, or the failure to render, any professional architectural, engineering or surveying services, including:

- (a) The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; or
- (b) Supervisory, inspection, architectural or engineering activities.

#### e. Conditions

With respect to the insurance afforded to these additional insureds under a. Ongoing Operations and b. Completed Operations the following is added to Paragraph 4. Other Insurance, a. Primary Insurance under SECTION IV — COMMERCIAL GENERAL LIABILITY CONDITIONS:

This insurance is primary and will not contribute with any other insurance available to an additional insured under this coverage part provided that:

- (1) The additional insured is a Named Insured under such other insurance.
- (2) You have agreed in a written contract, written agreement or written permit to include that additional insured on your General Liability policy on a primary and/or noncontributory basis.

# 2. PROPERTY DAMAGE CARE, CUSTODY OR CONTROL

The following is added to Exclusion j. under SECTION I - COVERAGE A BODILY INJURY AND PROPERTY DAMAGE LIABILITY:

Paragraphs (4) and (5) do not apply for the limited purpose of providing the coverage and sub-limits of liability as set forth below.

We will pay those sums that the insured becomes legally obligated to pay as damages arising out of "property damage" to:

- (1) Personal property in the care, custody or control of the insured; and
- (2) That particular part of real property on which you or any contractors or subcontractors working directly or indirectly on your behalf are performing operations, if the "property damage" arises out of those operations.

The most we will pay under (1) and (2) above in any one "occurrence" or for all damages during any one policy period is a sub-limit of \$100,000.

These limits are included in and not in addition to the Limits of Insurance shown in the Declarations of the Commercial General Liability Policy.

Our right and duty to defend the insured against any "suit" for damages under (1) and (2) above ends when we have used up the applicable sub-limit of liability in the payment of judgments or settlements under it.

3. OTHER INSURANCE AMENDMENT — SUPPLE-MENTAL COVERAGE FOR INSURED'S INVOLVE-MENT IN A CONSOLIDATED (WRAP-UP) INSUR-ANCE PROGRAM OR SIMILAR PROJECT

The following is added to SECTION IV — COMMER-CIAL GENERAL LIABILITY CONDITIONS, Paragraph 4. Other Insurance b. Excess Insurance (1)(a):

(v) That is covered by a consolidated (wrap-up) or similar insurance program provided by the prime contractor/project manager or owner of the construction project in which you are involved for your ongoing operations or operations included within the "products-completed operations hazard", unless such consolidated (wrap-up) or similar program is specifically excluded from coverage on this policy.

#### 4. FELLOW EMPLOYEE EXTENSION

Under SECTION II — WHO IS AN INSURED Paragraphs 2.a. and 2.a. (1) are replaced by the following:

- a. Your "volunteer workers" only while performing duties related to the conduct of your business, or your "employees", other than either your "executive officers" (if you are an organization other than a partnership, joint venture, or limited liability company) or your managers (if you are a limited liability company), but only for acts within the scope of their employment by you or while performing duties related to the conduct of your business. The Employers Liability exclusion (SECTION I COVERAGES; COVERAGE A, exclusion e.) does not apply to this provision. However, none of these "employees" or "volunteer workers" are insureds for:
  - (1) "Bodily injury" or "personal and advertising injury":
    - (a) Arising out of his or her providing or failing to provide professional health care services.

#### 5. CONTRACTUAL LIABILITY (RAILROADS)

**Definition 9. Insured Contract** is amended as follows:

Paragraph **c.** is deleted in its entirety and replaced with the following:

Any easement or license agreement;

Paragraph f.(1) is deleted in its entirety.

# 6. CONTRACTUAL LIABILITY AMENDMENT — (PERSONAL AND ADVERTISING INJURY)

If it is required in a written contract, written agreement or written permit with the insured that any contractual liability exclusion for Personal Injury be removed from the policy, then Exclusion e. Contractual Liability under COVERAGE B PERSONAL AND ADVERTISING INJURY, 2. Exclusions is deleted in its entirety and replaced with the following:

#### e. Contractual Liability

"Personal and advertising Injury" for which the insured has assumed liability in a contract or agreement arising out of an "advertisement". This exclusion does not apply to liability for damages that the insured would have in the absence of the contract or agreement.

#### 7. WAIVER OF GOVERNMENTAL IMMUNITY

We will waive, both in the adjustment of claims and in the defense of "suits" against the insured, any governmental immunity of the insured, unless the insured requests in writing that we not do so.

Waiver of immunity as a defense will not subject us to liability for any portion of a claim or judgment in excess of the applicable limit of insurance.

#### 8. DAMAGE TO PREMISES RENTED TO YOU

The Limit of Insurance for Damage To Premises Rented To You is increased to \$1,000,000.

# ElitePac® General Liability Extension Endorsement

COMMERCIAL GENERAL LIABILITY
CG 73 00 01 19

#### **SUMMARY OF COVERAGES (including index)**

This is a summary of the various additional coverages and coverage modifications provided by this endorsement. No coverage is provided by this summary. Refer to the actual endorsement (Pages 3-through-9) for changes affecting your insurance protection.

DESCRIPTION	PAGE FOUND		
Additional Insureds - Primary and Non-Contributory Provision	Page 8		
<ul> <li>Blanket Additional Insureds - As Required By Contract</li> <li>Owners, Lessees or Contractors (includes Architects, Engineers or Surveyors</li> <li>Lessors of Leased Equipment</li> <li>Managers or Lessors of Premises</li> <li>Mortgagees, Assignees and Receivers</li> <li>Any Other person or organization other than a joint venture</li> </ul>	Page 5		
Grantors of Permits			
Broad Form Vendors Coverage	Page 7		
Damage To Premises Rented To You (Including Fire, Lightning or Explosion)	Page 3		
Electronic Data Liability (\$100,000)	Page 4		
Employee Definition Amended	Page 9		
Employees As Insureds Modified	Page 5		
Employer's Liability Exclusion Amended (Not applicable in New York)	Page 3		
Incidental Malpractice Exclusion modified	Page 7		
Knowledge of Occurrence, Claim, Suit or Loss	Page 7		
Liberalization Clause	Page 8		
Mental Anguish Amendment (Not applicable to New York)	Page 9		
Newly Formed or Acquired Organizations	Page 5		
Non-Owned Aircraft	Page 3		
Non-Owned Watercraft (under 60 feet)	Page 3		
Not-for-profit Members - as additional insureds	Page 5		
Personal And Advertising Injury - Discrimination Amendment (Not applicable in New York)	Page 8		
Products Amendment (Medical Payments)	Page 4		
Supplementary Payments Amended - Bail Bonds (\$5,000) and Loss of Earnings (\$1,000)	Page 4		
Two or More Coverage Parts or Policies Issued By Us	Page 8		
Unintentional Failure to Disclose Hazards	Page 8		
Waiver of Transfer of Rights of Recovery (subrogation)	Page 8		
When Two or More Coverage Parts of this Policy Apply to a Loss	Page 3		

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# ElitePac® General Liability Extension Endorsement

COMMERCIAL GENERAL LIABILITY
CG 73 00 01 19

#### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies the insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

The **SECTIONS** of the Commercial General Liability Coverage Form identified in this endorsement will be amended as shown below. However, **if (a) two or more Coverage Parts of this policy, or (b) two or more forms or endorsements within the same Coverage Part apply to a loss, coverage provision(s) with the broadest language will apply, unless specifically stated otherwise within the particular amendment covering that loss.** 

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

#### **COVERAGES - Amendments**

SECTION I $^{\prime}$  - COVERAGE A BODILY INJURY AND PROPERTY DAMAGE LIABILITY

#### **EXCLUSIONS**

#### **Employer's Liability Amendment**

(This provision is not applicable in the State of New York).

The following is added to Exclusion e. Employer's Liability under COVERAGE A BODILY INJURY AND PROPERTY DAMAGE LIABILITY, 2. Exclusions:

This exclusion also does not apply to any "temporary worker".

#### Non-Owned Aircraft, Auto or Watercraft

- A. Paragraph (2) of Exclusion g. Aircraft, Auto Or Watercraft under COVERAGE A BODILY INJURY AND PROPERTY DAMAGE LIABILITY, 2. Exclusions is deleted in its entirety and replaced with the following:
  - (2) A watercraft you do not own that is:
    - (a) Less than 26 feet long and not being used to carry persons or property for a charge; or
    - (b) At least 26 feet, but less than 60 feet long, and not being used to carry persons or property for a charge. Any person is an insured who uses or is responsible for the use of such watercraft with your expressed or implied consent. However, if the insured has any other valid and collectible insurance for "bodily injury" or "property damage" that would be covered under this provision, or on any other basis, this coverage is then excess, and subject to Condition 4. Other Insurance, b. Excess Insurance under SECTION IV COMMERCIAL GENERAL LIABILITY CONDITIONS.

B. The following is added to Exclusion g. Aircraft, Auto Or Watercraft under COVERAGE A BODILY INJURY AND PROPERTY DAMAGE LIABILITY, 2. Exclusions:

This exclusion does not apply to:

(6) Any aircraft, not owned or operated by any insured, which is hired, chartered or loaned with a paid crew. However, if the insured has any other valid and collectible insurance for "bodily injury" or "property damage" that would be covered under this provision, or on any other basis, this coverage is then excess, and subject to Condition 4. Other Insurance, b. Excess Insurance under SECTION IV - COMMERCIAL GENERAL LIABILITY CONDITIONS.

#### **Damage To Premises Rented to You**

A. The last paragraph of Paragraph 2. Exclusions under COVERAGE A BODILY INJURY AND PROPERTY DAMAGE is deleted in its entirety and replaced with the following:

Exclusions **c. through n.** do not apply to damage by fire, lightning or explosion to premises rented to you or temporarily occupied by you with the permission of the owner. A separate limit of insurance applies to this coverage as described in **SECTION III - LIMITS OF INSURANCE.** 

- B. Paragraph 6. under SECTION III LIMITS OF INSURANCE is deleted in its entirety and replaced with the following:
  - 6. Subject to Paragraph 5. above, the most we will pay under COVERAGE A for damages because of "property damage" to any one premises, while rented to you, or in the case of damage caused by fire, lightning or explosion, while rented to you or temporarily occupied by you with permission of the owner, for all such damage caused by fire, lightning or explosion proximately caused by the same event, whether such damage results from fire, lightning or explosion or any combination of the three, is the amount shown in the Declarations for the Damage To Premises Rented To You Limit
- C. Paragraph a. of Definition 9. "Insured contract" under SECTION V - DEFINITIONS is deleted in its entirety and replaced with the following:
  - a. A contract for a lease of premises. However, that portion of the contract for a lease of premises that indemnifies any person or organization for damage by fire, lightning or explosion to premises while rented to you or temporarily occupied by you with the permission of the owner is not an "insured contract";

#### **Electronic Data Liability**

- A. Exclusion p. Access or Disclosure Of Confidential Or Personal Information And Data-related Liability under COVERAGE A BODILY INJURY AND PROPERTY DAMAGE LIABILITY, 2. Exclusions is deleted in its entirety and replaced by the following:
  - p. Access or Disclosure Of Confidential Or Personal Information And Data-related Liability

Damages arising out of:

- (1) Any access to or disclosure of any person's or organization's confidential or personal information, including patents, trade secrets, processing methods, customer lists, financial information, credit card information or any other type of nonpublic information; or
- (2) The loss of, loss of use of, damage to, corruption of, inability to access, or inability to manipulate "electronic data" that does not result from physical injury to tangible property.

This exclusion applies even if damages are claimed for notification costs, credit monitoring expenses, forensic expenses, public relations expenses or any other loss, cost or expense incurred by you or others arising out of that which is described in Paragraph (1) or (2) above.

B. The following paragraph is added to SECTION III - LIMITS OF INSURANCE:

Subject to **5.** above, the most we will pay under **COVERAGE A** for "property damage" because of all loss of "electronic data" arising out of any one "occurrence" is a sub-limit of \$100,000.

# SECTION I - COVERAGE C MEDICAL PAYMENTS EXCLUSIONS

#### **Any Insured Amendment**

Exclusion a. Any Insured under COVERAGE C MEDICAL PAYMENTS, 2. Exclusions is deleted in its entirety and replaced with the following:

#### a. Any Insured

To any insured.

This exclusion does not apply to:

- (1) "Not-for-profit members";
- (2) "Golfing facility" members who are not paid a fee, salary, or other compensation; or
- (3) "Volunteer workers".

This exclusion exception does not apply if **COVERAGE C MEDICAL PAYMENTS** is excluded by another endorsement to this Coverage Part.

#### **Product Amendment**

Exclusion f. Products-Completed Operations Hazard under COVERAGE C MEDICAL PAYMENTS, 2. Exclusions is deleted in its entirety and replaced with the following:

f. Products-Completed Operations Hazard

Included within the "products-completed operations hazard".

This exclusion does not apply to "your products" sold for use or consumption on your premises, while such products are still on your premises.

This exclusion exception, does not apply if **COVERAGE C MEDICAL PAYMENTS** is excluded by another endorsement to this Coverage Part.

# SECTION I - SUPPLEMENTARY PAYMENTS - COVERAGES A AND B

#### **Expenses For Bail Bonds And Loss Of Earnings**

- A. Subparagraph 1.b. under SUPPLEMENTARY PAYMENTS - COVERAGES A AND B is deleted in its entirety and replaced with the following:
  - b. Up to \$5,000 for cost of bail bonds required because of accidents or traffic law violations arising out of the use of any vehicle to which Bodily Injury Liability Coverage applies. We do not have to furnish these bonds.

- B. Subparagraph 1.d. under SUPPLEMENTARY PAYMENTS COVERAGES A AND B is deleted in its entirety and replaced with the following:
  - d. All reasonable expenses incurred by the insured at our request to assist us in the investigation or defense of the claim or "suit", including actual loss of earnings up to \$1,000 a day because of time off from work.

# SECTION II - WHO IS AN INSURED - Amendments Not-for-Profit Organization Members

The following paragraph is added to **SECTION II - WHO IS AN INSURED:** 

If you are an organization other than a partnership, joint venture, or a limited liability company, and you are a not-for-profit organization, the following are included as additional insureds:

- 1. Your officials;
- 2. Your trustees:
- 3. Your members;
- 4. Your board members;
- 5. Your commission members;
- 6. Your agency members;
- 7. Your insurance managers:
- 8. Your elective or appointed officers; and
- 9. Your "not-for-profit members".

However only with respect to their liability for your activities or activities they perform on your behalf.

#### **Employees As Insureds Modified**

- A. Subparagraph 2.a.(1)(a) under SECTION II WHO IS AN INSURED does not apply to "bodily injury" to a "temporary worker" caused by a co-"employee" who is not a "temporary worker".
- B. Subparagraph 2.a.(2) under SECTION II WHO IS AN INSURED does not apply to "property damage" to the property of a "temporary worker" or "volunteer worker" caused by a co-"employee" who is not a "temporary worker" or "volunteer worker".
- C. Subparagraph 2.a.(1)(d) under SECTION II WHO IS AN INSURED does not apply to "bodily injury" caused by cardio-pulmonary resuscitation or first aid services administered by a co-"employee".

With respect to this provision only, Subparagraph (1) of Exclusion 2. e. Employer's Liability under SECTION I-COVERAGES, COVERAGE A BODILY INJURY AND PROPERTY DAMAGE LIABILITY does not apply.

#### **Newly Formed Or Acquired Organizations**

A. Subparagraph 3.a. under SECTION II - WHO IS AN INSURED is deleted in its entirety and replaced with the following:

- a. Coverage under this provision is afforded only until the 180th day after you acquire or form the organization or the end of the policy period, whichever is earlier. However, COVERAGE A does not apply to "bodily injury" or "property damage" that occurred before you acquired or formed the organization.
- B. The following paragraph is added to SECTION II WHO IS AN INSURED, Paragraph 3:

If you are engaged in the business of construction of dwellings three stories or less in height, or other buildings three stories or less in height and less than 25,000 square feet in area, you will also be an insured with respect to "your work" only, for the period of time described above, for your liability arising out of the conduct of any partnership or joint venture of which you are or were a member, even if that partnership or joint venture is not shown as a Named Insured. However, this provision only applies if you maintain or maintained an interest of at least fifty percent in that partnership or joint venture for the period of that partnership or joint venture.

This provision does not apply to any partnership or joint venture that has been dissolved or otherwise ceased to function for more than thirty-six months.

With respect to the insurance provided by this provision, Newly Formed or Acquired Organizations, the following is added to SECTION IV - COMMERCIAL GENERAL LIABILITY, Paragraph 4. Other Insurance, Subparagraph b. Excess Insurance:

The insurance provided by this provision, **Newly Formed or Acquired Organizations**, is excess over any other insurance available to the insured, whether primary, excess, contingent or on any other basis.

(All other provisions of this section remain unchanged)

# Blanket Additional Insureds - As Required By Contract

Subject to the **Primary and Non-Contributory** provision set forth in this endorsement, **SECTION II - WHO IS AN INSURED** is amended to include as an additional insured:

- A. Owners, Lessees or Contractors/Architects, Engineers and Surveyors
  - Any person or organization for whom you are performing operations when you and such person or organization have agreed in a written contract, written agreement or written permit that such person or organization be added as an additional insured on your commercial general liability policy; and

2. Any other person or organization, including any architects, engineers or surveyors not engaged by you, whom you are required to add as an additional insured under your policy in the contract or agreement in Paragraph 1. above:

Such person or organization is an additional insured only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

- a. Your acts or omissions: or
- The acts of omissions of those acting on your behalf;

in the performance of your ongoing operations performed for the additional insured in Paragraph 1., above.

However, this insurance does not apply to:

"Bodily injury", "property damage" or "personal and advertising injury" arising out of the rendering of, or the failure to render, any professional architectural, engineering or surveying services by or for you, including:

- a. The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; and
- **b.** Supervisory, inspection, architectural or engineering activities.

Professional services do not include services within construction means, methods, techniques, sequences and procedures employed by you in connection with your operations in your capacity as a construction contractor.

A person or organization's status as an additional insured under this endorsement ends when your operations for the person or organization described in Paragraph 1. above are completed.

#### **B.** Other Additional Insureds

Any of the following persons or organizations with whom you have agreed in a written contract, written agreement or written permit that such persons or organizations be added as an additional insured on your commercial general liability policy:

#### 1. Lessors of Leased Equipment

Any person or organization from whom you lease equipment, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your maintenance, operation or use of equipment leased to you by such person or organization.

With respect to the insurance afforded to these additional insureds, this insurance does not apply to any "occurrence" which takes place after the equipment lease expires.

#### 2. Managers or Lessors of Premises

Any person or organization from whom you lease premises, but only with respect to liability arising out of the ownership, maintenance or use of that part of the premises leased to you.

This insurance does not apply to any "occurrence" which takes place after you cease to be a tenant of that premises.

#### 3. Mortgagees, Assignees or Receivers

Any person or organization with respect to their liability as mortgagee, assignee or receiver and arising out of the ownership, maintenance or use of your premises.

This insurance does not apply to any "occurrence" which takes place after the mortgage is satisfied, or the assignment or receivership ends.

# 4. Any Person or Organization Other Than A Joint Venture

Any person or organization (other than a joint venture of which you are a member), but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts of omissions of those acting on your behalf in the performance of your ongoing operations or in connection with property owned by you.

# 5. State or Governmental Agency or Political Subdivision - Permits or Authorizations

Any state or governmental agency or subdivision or political subdivision, but only with respect to:

- a. Operations performed by you or on your behalf for which the state or governmental agency or subdivision or political subdivision has issued a permit or authorization; or
- b. The following hazards for which the state or governmental agency or subdivision or political subdivision has issued a permit or authorization in connection with premises you own, rent or control and to which this insurance applies:

- (1) The existence, maintenance, repair, construction, erection or removal of advertising signs, awnings, canopies, cellar entrances, coal holes, driveways, manholes, marquees, hoist away openings, sidewalk vaults, street banners or decorations and similar exposures;
- (2) The construction, erection or removal of elevators; or
- (3) The ownership, maintenance or use of any elevators covered by this insurance.

This insurance does not apply to:

- (a) "Bodily injury" or "property damage" arising out of operations performed for the federal government, state or municipality; or
- (b) "Bodily injury" or "property damage" included within the "productscompleted operations hazard".

With respect to Paragraphs 2. through 4., this insurance does not apply to structural alterations, new construction or demolition operations performed by or on behalf of such person or organization.

The provisions of this coverage extension do not apply unless the written contract or written agreement has been signed by the Named Insured or written permit issued prior to the "bodily injury" or "property damage" or "personal and advertising injury".

#### **Broad Form Vendors Coverage**

Subject to the **Primary and Non-Contributory** provision set forth in this endorsement, **SECTION II - WHO IS AN INSURED** is amended to include as an additional insured any person or organization (referred to below as vendor) for whom you have agreed in a written contract or written agreement to provide coverage as an additional insured under your policy. Such person or organization is an additional insured only with respect to "bodily injury" or "property damage" arising out of "your products" which are distributed or sold in the regular course of the vendor's business. However, the insurance afforded the vendor does not apply to:

- a. "Bodily injury" or "property damage" for which the vendor is obligated to pay damages by reason of the assumption of liability in a contract or agreement; however this exclusion does not apply to liability for damages that the vendor would have in the absence of the contract or agreement;
- b. Any express warranty unauthorized by you;

- Any physical or chemical change in the product made intentionally by the vendor;
- d. Repackaging, unless unpacked solely for the purpose of inspection, demonstration, testing, or the substitution of parts under instructions from the manufacturer, and then repackaged in the original container;
- e. Any failure to make such inspections, adjustments, tests or servicing as the vendor has agreed to make or normally undertakes to make in the usual course of business in connection with the sale of the product; or
- f. Products which, after distribution or sale by you, have been labeled or re-labeled or used as a container, part of ingredient of any other thing or substance by or for the vendor; however this insurance does not apply to any insured person or organization, from who you have acquired such products, or any ingredient, part or container, entering into, accompanying or containing such products.

The provisions of this coverage extension do not apply unless the written contract or written agreement has been signed by the Named Insured prior to the "bodily injury" or "property damage".

#### **Incidental Malpractice**

Subparagraph 2.a.(1)(d) under SECTION II - WHO IS AN INSURED is deleted in its entirety and replaced with the following:

(d) Arising out of his or her providing or failing to provide professional health care services.

This does not apply to nurses, emergency medical technicians or paramedics if you are not in the business or occupation of providing any such professional services.

This also does not apply to "bodily injury" caused by cardio-pulmonary resuscitation or first aid services administered by a co-"employee".

This provision does not apply if you are a Social Service or Senior Living risk.

SECTION IV - COMMERCIAL GENERAL LIABILITY CONDITIONS - Amendments

#### Knowledge Of Occurrence, Claim, Suit Or Loss

The following is added to Paragraph 2. Duties in the Event of Occurrence, Offense, Claim or Suit under SECTION IV - COMMERCIAL GENERAL LIABILITY CONDITIONS:

The requirements under this paragraph do not apply until after the "occurrence" or offense is known to:

- 1. You, if you are an individual;
- 2. A partner, if you are a partnership;

- **3.** An "executive officer" or insurance manager, if you are a corporation;
- Your members, managers or insurance manager, if you are a limited liability company; or
- 5. Your elected or appointed officials, officers, members, trustees, board members, commission members, agency members, or your administrator or your insurance manager if you are an organization other than a partnership, joint venture, or limited liability company.

#### **Primary and Non-Contributory Provision**

The following is added to Paragraph 4. Other Insurance, b. Excess Insurance under SECTION IV-COMMERCIAL GENERAL LIABILITY CONDITIONS:

This insurance is primary to and we will not seek contribution from any other insurance available to an additional insured under this policy provided that:

- (1) The additional insured is a Named Insured under such other insurance; and
- (2) You have agreed in a written contract, written agreement or written permit that this insurance would be primary and would not seek contribution from any other insurance available to the additional insured.

#### **Unintentional Failure To Disclose Hazards**

The following is added to Paragraph 6. Representations under SECTION IV - COMMERCIAL GENERAL LIABILITY CONDITIONS:

However, if you should unintentionally fail to disclose any existing hazards in your representations to us at the inception date of the policy, or during the policy period in connection with any additional hazards, we shall not deny coverage under this Coverage Part based upon such failure to disclose hazards.

#### **Waiver Of Transfer Of Rights Of Recovery**

The following is added to Paragraph 8. Transfer of Rights Of Recovery Against Others To Us under SECTION IV - COMMERCIAL GENERAL LIABILITY CONDITIONS:

We will waive any right of recovery we may have against a person or organization because of payments we make for "bodily injury" or "property damage" arising out of your ongoing operations or "your work" done under a written contract or written agreement and included in the "products-completed operations hazard", if:

- 1. You have agreed to waive any right of recovery against that person or organization in a written contract or written agreement;
- 2. Such person or organization is an additional insured on your policy; or

You have assumed the liability of that person or organization in that same contract, and it is an "insured contract".

The section above only applies to that person or organization identified above, and only if the "bodily injury" or "property damage" occurs subsequent to the execution of the written contract or written agreement.

#### Liberalization

The following condition is added to SECTION IV-COMMERCIAL GENERAL LIABILITY CONDITIONS:

If we revise this Coverage Part to provide more coverage without additional premium charge, subject to our filed company rules, your policy will automatically provide the additional coverage as of the day the revision is effective in your state.

Two or More Coverage Parts or Policies Issued By

(This provision is not Applicable in the state of New York or Wisconsin).

The following condition is added to SECTION IV - COMMERCIAL GENERAL LIABILITY CONDITIONS:

It is our intention that the various coverage parts or policies issued to you by us, or any company affiliated with us, do not provide any duplication or overlap of coverage. We have exercised diligence to draft our coverage parts and policies to reflect this intention. However, if the facts and circumstances that will respond to any claim or "suit" give rise to actual or claimed duplication or overlap of coverage between the various coverage parts or policies issued to you by us or any company affiliated with us, the limit of insurance under all such coverage parts or policies combined shall not exceed the highest applicable limit under this coverage, or any one of the other coverage forms or policies.

This condition does not apply to any Excess or Umbrella policy issued by us specifically to apply as excess insurance over this coverage part or policy to which this coverage part is attached.

#### **SECTION V - DEFINITIONS**

#### Discrimination

(This provision does not apply in New York).

- A. The following is added to Definition 14. "Personal and advertising injury":
  - "Personal and advertising injury" also means "discrimination" that results in injury to the feelings or reputation of a natural person, however only if such "discrimination" or humiliation is:
  - 1. Not done by or at the direction of:
    - a. The insured; or

- b. Anyone considered an insured under SECTION II - WHO IS AN INSURED;
- 2. Not done intentionally to cause harm to another person.
- Not directly or indirectly related to the employment, prospective employment or termination of employment of any person or persons by any insured.
- Not arising out of any "advertisement" by the insured.
- B. The following definition is added to **SECTION V DEFINITIONS**:

"Discrimination" means:

- Any act or conduct that would be considered discrimination under any applicable federal, state, or local statute, ordinance or law;
- b. Any act or conduct that results in disparate treatment of, or has disparate impact on, a person, because of that person's race, religion, gender, sexual orientation, age, disability or physical impairment; or
- c. Any act or conduct characterized or interpreted as discrimination by a person based on that person's race, religion, gender, sexual orientation, age, disability or physical impairment.

It does not include acts or conduct characterized or interpreted as sexual intimidation or sexual harassment, or intimidation or harassment based on a person's gender.

#### **Electronic Data**

The following definition is added to **SECTION V-DEFINITIONS**:

"Electronic data" means information, facts or programs stored as or on, created or used on, or transmitted to or from computer software, including systems and applications software, hard or floppy disks, CD-ROMS, tapes, drives, cell, data processing devices or any other media which are used with electronically controlled equipment. For the purpose of the Electronic Data Liability coverage provided by this endorsement, Definition 17. "Property damage" is deleted in its entirety and replaced by the following:

- 17. "Property damage" means:
  - a. Physical injury to tangible property, including all resulting loss of use of that property. All such loss of use shall be deemed to occur at the time of the physical injury that caused it; or

b. Loss of, loss of use of, damage to, corruption of, inability to access, or inability to properly manipulate "electronic data", resulting from physical injury to tangible property. All such loss of "electronic data" shall be deemed to occur at the time of the "occurrence" that caused it.

For the purpose of the Electronic Data Liability coverage provided by this endorsement, "electronic data" is not tangible property.

#### **Employee Amendment**

Definition 5. "Employee" under SECTION V - DEFINITIONS is deleted in its entirety and replaced by the following:

 "Employee" includes a "leased worker", or a "temporary worker". If you are a School, "Employee" also includes a student teacher.

#### **Golfing Facility**

The following definition is added to **SECTION V** - **DEFINITIONS**:

"Golfing facility" means a golf course, golf club, driving range, or miniature golf course.

#### **Mental Anguish Amendment**

(This provision does not apply in New York).

Definition 3. "Bodily injury" under **SECTION V-DEFINITIONS** is deleted in its entirety and replaced with the following:

3. "Bodily injury" means bodily injury, sickness or disease sustained by a person, including death resulting from any of these at any time. This includes mental anguish resulting from any bodily injury, sickness or disease sustained by a person. (In New York, mental anguish has been determined to be "bodily injury").

#### **Not-for-profit Member**

The following definition is added to **SECTION V-DEFINITIONS**:

"Not-for-profit member" means a person who is a member of a not-for-profit organization, including clubs and churches, who receives no financial or other compensation.





# PJ HOERR

Storage Washington Police Dept Evidence

2256000

S&S Builders Hardware Co. 917 W. Pioneer Parkway Peoria, IL 61615



PJ Heer | West PD accept THE CONST. 14 PJ Hoesse-Washington P.D. PS Hoer / Wash. P.D. 2056000



Peoria Office: 107 N. Commerce Place, Peoria, IL 61604 • Phone: 309.688.9567 • Fax: 309.688.9556

Bloomington/Normal Office: 117 Merle Lane, Normal, IL 61761 • Phone: 309.888.9567 • Fax: 309.888.9556

## PARTIAL WAIVER OF LIEN - MATERIAL OR LABOR

STATE OF ILLINOIS )	PJHI Project No.: 11192
) S.S. PEORIA COUNTY )	Application No. : 2
	Invoice No.: C25171
TO ALL WHOM IT MAY CONCERN:	Federal Tax ID No.: 20-3852082

May 01, 2025

WHEREAS, we the undersigned **P. J. HOERR, INC.** have been employed by **CITY OF WASHINGTON** to furnish Labor and Materials for the project known as **WASHINGTON POLICE EVIDENCE STORAGE**, Located at 115 W Jefferson Street, Situated in the City of Washington, County of Tazewell, State of Illinois.

NOW THEREFORE, KNOW YE, That we the undersigned, for and in consideration of **THREE HUNDRED FORTY THOUSAND EIGHT HUNDRED FIFTY-SEVEN AND 67 / 100** [\$340,857.67] Dollars, the receipt whereof is hereby acknowledged, do hereby waive and release any and all lien, or claim, or right of lien on said above described building and premises under "An Act to Revise the Law in Relation to Mechanic's Liens," approved May 18, 1903, in force July 1, 1903, together with all amendments thereto and all the lien laws of the State of Illinois, on account of labor or materials, or both, furnished or which may be furnished by the undersigned to or on account of the said **CITY OF WASHINGTON** for said building premises.

Given under our hand and seal this 1st day of May, 2025

Bv:

Scott Rinkenberger, Chief Executive Officer

State of: Illinois

County of: Peoria

Subscribed and affirmed to before me this 1st day of May, 2025

Notary Public:

My Commission expires: July 10, 2027

"OFFICIAL SEAL"
JODI SUMMER
Notary Public, State of Illinois
My Commission Expires July 10, 2027
Commission # 818656



Peoria Office: 107 N. Commerce Place, Peoria, IL 61604 Phone: 309/688-9567

Bloomington/Normal Office: 117 Merle Lane, Normal, IL 61761 Phone: 309/888-9567

# Letter of Transmittal

To: Dewberry

Nathan D. Custer, AIA NCARB

Date:

April 2, 2025

Re:

**Washington Police Evidence Storage** 

PJHI Job No.:

11192

110 110 100 100 100 100 100 100 100 100									
Pay	-								
App#	Date	Description							
2	05/01/25	P.J. Hoerr Pay App #1 with Waiver							

## **Certified Payroll**

Start date	thur date	contractor	
2/26/2025	04/29/25	P.J. Hoerr, Inc.	
3/13/2025	03/26/25	Hein Construction, Inc.	requested pr dept out for family emergency
4/10/2025	04/23/25	Laser Electric	

#### Waivers

Date	AMOUNT	PA#	Contractor
3/13/2025	03/26/25	1	Hein Construction, Inc.



**Peoria Office:** 107 N. Commerce Place - Peoria, IL 61604 Phone: 309/688-9567 Fax: 309/688-9556

Bloomington/Normal Office: 117 Merle Lane - Normal, IL 61761 Phone: 309/888-9567 Fax: 309/888-9556

Page 11

Period: 04/23/25 - 4/29/25

WeekEnd: 4/29/25

# **Certified Payroll**

Job: 11192 WASHINGTON POLICE EVIDENCE STORAGE

(1) (2) (3) (4)		ОТ		ш		(5)				(6)	(7)	(8)	(9) Total	(10)	(11) Net
Employee		or ST	Sun 04/27	Mon 04/28	Tue	Wed 04/23	Thu 04/24	Fri 04/25	Sat 04/26	Total Hours	Rate of Pay	Project Amount Earned	Gross	Deductions	Pay
Seiler, Jay D.  5106 EAST ROME ROAD CHILLICOTHE, IL 61523-1523 ***-**-7324 M/EX: S/2		ST	Check#:(	<b>3.00</b>	Date:05	2.00	3.00			8.00	40.82	326.56	\$0501Z5	VEHICLE USE 15.0 FICA 124.1 Union Ded 91.0	34 00 96
Race/Sex:W/M Carp L237 Peoria Zonel Superintendent	Prevailing Non-Prev	ST	y 1372	5.00 5.00		6.00 6.00	5.00 5.00	8.00 8.00	ANTON SE	32.00 32.00		326.56 1,306.94 1,306.94	Pen 21.79	Welf 9.70 Vac 0.00 A	
W / CA / J	Empl Tota	alš:	Sun 4/27	8.00 Mon 4/28		8.00 Wed 4/23	8.00 Thu 4/24	8.00	Sat 4/26		18 19 6	1.633.50 Project Amounts	Tot	Deduction	Net Pay
		ST OT DT	0.00 0.00 0.00	3.00 0.00 0.00	0.00 0.00 0.00	2.00 0.00 0.00	3.00 0.00 0.00	0.00	0.00 0.00 0.00	8.00 0.00 0.00		326.56 0.00 0.00	1,633	3.50 532.37	1,101.13

Page 12 WeekEnd : 4/29/25

# **Certified Payroll**

Period: 04/23/25 - 04/29/25

Job# 11192 - 11192 WASHINGTON POLICE EVIDENCE STORAGE

#### **AFFIDAVIT**

Weekly Statement of Compliance

Date: 5/1/2025

,	b Wagenbach	Payroll Mgr
do hereby state		(Title) or supervise the payment public works project
Job:11192	WASHINGTON PO	DLICE EVIDENCE STORAGE
	(Name of the	Project)
that during the	payroll period c	ommencing on the
23 day o	of April ,	2025 and ending the
29 day 0	of April,	2025 ,
full weekly wa	iges earned, that	project have been paid the no rebates have been or wil ectly to or on behalf of said

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 persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates contained therin are not less than the actual rates herein stated and that the classification set forth for each laborer or mechanic conform to the work he/she performed.

P. J. HOERR, INC.

Signature

Digital Signature

#### **FRINGES**

#### Health Fund

- 5000 CARPENTERS FRINGE BENEFIT FUND P.O. BOX 94416
- CHICAGO, IL 60690-4416 1-800-448-5825 5010 CENTRAL IL CARPENTERS H & W 200 S. MADIGAN DRIVE

#### LINCOLN, IL 62656 (217)-732-1919 Pension Fund

- 5000 CARPENTERS FRINGE BENEFIT FUND P.O. BOX 94416 CHICAGO, IL 60690-4416 1-800-448-5825
- 5010 CENTRAL IL CARPENTERS H & W 200 S. MADIGAN DRIVE LINCOLN, IL 62656 (217)-732-1919

#### **SUBCONTRACTORS**

Attach explanation of Monies paid, copy of contract of billing, or other pertinent information.

Company Name: P. J. HOERR, INC.

Contact person:

107 N. COMMERCE PLACE
(Address)

 $\frac{\text{PEORIA}}{\text{(City)}} \frac{\text{IL}}{\text{(State)}} \frac{61604}{\text{(Zipcode)}}$ 

Telephone Number: (309) 688-9567



 Peoria Office:
 107 N. Commerce Place - Peoria, IL 61604 Phone:
 309/688-9567 Fax:
 309/688-9556

 Bloomington/Normal Office:
 117 Merle Lane - Normal, IL 61761 Phone:
 309/888-9567 Fax:
 309/888-9556

Page 9

Period: 04/16/25 - 4/22/25

WeekEnd: 4/22/25

# **Certified Payroll**

Job: 11192 WASHINGTON POLICE EVIDENCE STORAGE

(1) (2) (3) (4)						(5)				(6)	(7)	(8)	(9)	(10)		(11)
		ОТ			urs an	d Day	s work				ъ.	Project	Total	B 1		Net Pay
Employee		or	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Total	Rate	Amount	Gross	Deduction	18	гау
		ST	04/20	04/21	04/22	04/16	04/17	04/18	04/19	Hours	of Pay	Earned				
Seiler, Jay D.			Check#:(	042425	Date:04	/24/25							Check #	FWT SWT	224.00 76.30	
106 EAST ROME ROAD		ST		4.00	4.00	4.00	2.00	4.00		18.00	40.82	734.76	042425	VEHICLE USE	15.00	
CHILLICOTHE, IL 61523-1523		İ												FICA Union Ded	124.91 92.40	
***-**-7324 M/EX: S/2	L	T . 1		4.00	1.00	4.00		4:00		. 10.00				Deductions:	532.61	1,100.19
Race/Sex:W/M Carp L237 Peoria Zone1	Prevailing		· · · · · · · · ·	4.00	4.00	4:00	\$5.2.00°			Mark and the same of the same	·	<sup>2</sup> 734.76	4			
Superintendent		ST		4.00		4.00	6.00	4.00		22.00	40.82			Welf 9.70 Vac 0.0	00 Appr 0	.66 Other 0.4
· r——n	Non-Preva	12 U.S. 1		4.00	4.00		6:00		Call (18 Carried)		<u></u>		Total 32.	50		
W/CA/J	Empl Tota	ls:	學學科學學	8.00	8.00	8.00	8.00	8.00		40.00	<u> </u>	1.632.80				
eriod: 04/16/25 - 4/22/25			G.		<b></b>	***	TECH.		~			Project	Tot	al .		Net
	10.75		Sun	Mon	Tue	Wed	Thu	Fri	Sat	Total		Amounts	Gr	ossDeduc	tions	Pay
Job Totals	Hou	rs	4/20	4/21	4/22	4/16	-4/17	4/18	4/19			4.	3.4			
		ST	0.00	4.00	4.00	4.00	2.00	4.00	0.00	18.00		734.76	1,632	80 532	2.61	1,100.19
		от	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00				
		DT	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00				

Page 10

WeekEnd: 4/22/25

# **Certified Payroll**

Period: 04/16/25 - 04/22/25

Job# 11192 - 11192 WASHINGTON POLICE EVIDENCE STORAGE

#### **AFFIDAVIT**

Weekly Statement of Compliance

Date: .	5/1/2025
---------	----------

I,	Kaleb W	/agenbach	1		Payroll Mgr
	reby state:		ay or s		(Title) ise the payment vorks project
	Job:11192 WA				DENCE STORAGE
		(Name of	f the Pro	ject)	
that d	uring the pa	yroll perio	od con	nmenci	ing on the
16	day of	April	,	2025	and ending the
22	day of	April	-,	2025	<del>-</del>
full w	eekly wages de either di	earned, to rectly or in P. J. HO	hat no ndirect ERR,	rebate tly to o INC.	nave been paid the es have been or will or on behalf of said
	4	Contractor of	or Subco	ntractor)	

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 persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates contained therin are not less than the actual rates herein stated and that the classification set forth for each laborer or mechanic conform to the work he/she performed.

Signature

Digital Signature

#### **FRINGES**

#### Health Fund

5010 CENTRAL II. CARPENTERS H & W 200 S. MADIGAN DRIVE LINCOLN, IL 62656 (217)-732-1919

#### Pension Fund

5000 CARPENTERS FRINGE BENEFIT FUND P.O. BOX 94416 CHICAGO, IL 60690-4416 1-800-448-5825 5010 CENTRAL IL CARPENTERS H & W

200 S. MADIGAN DRIVE LINCOLN, IL 62656 (217)-732-1919

#### **SUBCONTRACTORS**

(City)

Telephone Number: (309) 688-9567

Attach explanation of Monies paid, copy of contract of billing, or other pertinent information.

Company Name:	P. J. HOERR, INC	C.	
Contact person:			
107 N. COMMER	CE PLACE		
PEORIA	(Address) IL	61604	

(State)

(Zipcode)



Peoria Office: 107 N. Commerce Place - Peoria, IL 61604 Phone: 309/688-9567 Fax: 309/688-9556

Bloomington/Normal Office: 117 Merle Lane - Normal, IL 61761 Phone: 309/888-9567 Fax: 309/888-9556

Page 7

Period: 04/09/25 - 4/15/25

WeekEnd: 4/15/25

# **Certified Payroll**

Job: 11192 WASHINGTON POLICE EVIDENCE STORAGE

(1) (2) (3) (4)						(5)				(6)	(7)	(8)	(9)	(10)	(11)
n .		OT			urs an	<del></del>				T-4-1	D.4.	Project	Total Gross	D. L. at.	Net Pav
Employee		or	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Total		Amount	Gross	Deductions	гау
		ST	04/13	04/14	04/15	04/09	04/10	04/11	04/12	Hours	of Pay	Earned			
Seiler, Jay D.		arr.	Check#:										Check # 041725		4.00 5.30
5106 EAST ROME ROAD		ST		4.00	4.00	4.00	2.00	2.00		16.00	40.82	653.12	041725	VEHICLE USE 13	5,00 4.91
CHILLICOTHE, IL 61523-1523 ***-**-7324 M/EX: S/2													-1.632.80 at	Union Ded 92	2.40
Race/Sex:W/M	Prevailin	g · Total	20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2 4.00	~4.00	4.00	2.00	±≥2:00		≥16.00		653.12	7.4002.00,1	200,000,000,000	
Carp L237 Peoria Zone1		ST		4.00	4.00	4.00	6.00	6.00		24.00	40.82		Pen 21.79	Welf 9.70 Vac 0.00	Appr 0.66 Other 0.45
Superintendent	Non-Pre			4.00	4.00	4:00	6.00	₹6.00	a legación.	24.00		979.68	Total 32.	60	••
W / CA / J	Empl To	als:	188	8.00	8.00	8.00	8.00	8.00	17.34MB/X	40.00	<u> </u>	1.632.80			
Sprague, Tyler C.			Check#:	231456	Date:04	/18/25							Check #	FWT 92 SWT 53	4.00 3.50
307 W LAFAYETTE ST		ST					1.00			1.00	34.31	34.31	231456	FICA 82	2.68
AVON, IL 61415-1415 ***-**-1275 M/EX; M/0													1,080.77	Deductions: 34	
Race/Sex:W/M	Prevailin			Care.	*50 (\$50)		№\1.00	-7	\$1.00 P. (1)	1.00		34.31			
Finishers L18A12 - Bldg		ST		8.00	6.00	4.50	4.00	8.00		30.50	34.31			Welf 9.00 Vac 0.00 A	Appr 0.83 Other 0.27
Journeyman	Non-Prev		· · · · · · · · · · · · · · · · · · ·	8.00					1.30 to service (1)	0,010		1,046.46		32	
W/CM/J	Empl Tot	als:		**************************************	6.00	4.50	5.00	::-8.00 ±	178339	<u>~31:50                                    </u>	***********	1.080.77	-		
Teel, Nathan E.			Check#:	41725	Date:04	/17/25	3.7						Check#	FWT 147	7.00
16497 E MOHAWK DR		ST				1.00	1.50			2.50	38.02	95.05	041725	VEHICLE USE 15	5.28 5.00
CUBA, IL 61427-1427										l				Union Ded 131	5.34 1.61
***-**-0106 M/EX: M/0 Race/Sex:W/M	Prevailin	r Total	186 V. C	1 4 4	i gizant	5 1:00	:≥-1≎50	e us lov	- 18 (18 CH)	· · · · · · · · · · · · · · · · · · ·		05:05	1,520.80	Deductions: 485	5.23 × %1,035.57
Finishers L18A539-Bldg	Tievaiini	ST	368, 107.0	8.00	8.00	7.00	6.50	8.00	20 Me 115 11 12	37.50	38.02	95:05	Don 16 70	Welf 10.00 Vac 0.00	A 0.74 Oth 0.2
Superintendent	Non-Prev	-	37 50 7	8.00	8.00	7.00 367.00			* * \( \frac{1}{2} \frac{1} \frac{1}{2} \frac{1}{2} \frac{1}{2} \frac{1}{2} \frac{1}{2} \f	37.50	38.02		Total 27.		Appr 0.74 Other 0.2
W/CM/J	Empl Tot			8.00			8.00	8.00	-10.0		<u> </u>	1.520.80	-3		
Period: 04/09/25 - 4/15/25	10t			0.00	0.00	0.00		3.00		10.00	2027-022827829595959546	Project	Tot	al	Net
			Sun	Mon	Tue	Wed	Thu	Fri	Sat	Total		Amounts	Gr	Doductio	ns Pav
Job Totals	Ho	urs	4/13	4/14	4/15	4/09	4/10	4/11	4/12			. A. Ounts			Lay
		ST	0.00	4.00	4.00	5.00	4.50	2.00	0.00	19.50		782.48	4,234	.37 1,363.63	3 2,870.74
		ОТ	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00	1		
		DT	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00	1		

Page 8

WeekEnd: 4/15/25

## **Certified Payroll**

Period: 04/09/25 - 04/15/25

Date: 5/1/2025

Job# 11192 - 11192 WASHINGTON POLICE EVIDENCE STORAGE

#### **AFFIDAVIT**

Weekly Statement of Compliance

,	Kaleb Wagenbach	Payroll Mgr

(Name of Signatory Party)
(One the payment of the persons employed on the public works project

Job:11192 WASHINGTON POLICE EVIDENCE STORAGE

(Name of the Project)

that during the payroll period commencing on the

9 day of April , 2025 and ending the 15 day of April , 2025 ,

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said P. J. HOERR, INC.

(Contractor or Subcontractor)

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 persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates contained therin are not less than the actual rates herein stated and that the classification set forth for each laborer or mechanic conform to the work he/she performed.

Contract

Signature

Digital Signature

#### **FRINGES**

#### Health Fund

- 5010 CENTRAL IL CARPENTERS H & W 200 S. MADIGAN DRIVE LINCOLN, IL 62656 (217)-732-1919
- 5283 PLASTERS & CEMENT MASONS L18 C/O QUORUM CONSULTING GROUP SPRINGFIELD, IL 62711 1-800-440-1548
- 5370 INDIANA STATE COUNCIL WELFARE FUNDS P.O. BOX 47489 INDIANAPOLIS, IN 46247 (800) 403-0423

#### Pension Fund

- 5000 CARPENTERS FRINGE BENEFIT FUND P.O. BOX 94416 CHICAGO, IL 60690-4416 1-800-448-5825
- 5010 CENTRAL IL CARPENTERS H & W 200 S. MADIGAN DRIVE
- LINCOLN, IL 62656 (217)-732-1919
  5282 PLASTERS & CEMENT MASON L18
  C/O QUORUM CONSULTING GROUP
  SPRINGFIELD, IL 62711 1-800-440-1548-106
- 5283 PLASTERS & CEMENT MASONS L18 C/O QUORUM CONSULTING GROUP SPRINGFIELD, IL 62711 1-800-440-1548

#### **SUBCONTRACTORS**

Attach explanation of Monies paid, copy of contract of billing, or other pertinent information.

Company Name:	P. J. HOERR, INC.
Contact person:	
107 N COMMERC	CE PLACE

(Address)

61604

(City) (State) (Zipcode)
Telephone Number: (309) 688-9567

PEORIA

SBE 48 (Rev. 09/11/20)



Peoria Office: 107 N. Commerce Place - Peoria, IL 61604 Phone: 309/688-9567 Fax: 309/688-9556 Bloomington/Normal Office: 117 Merle Lane - Normal, IL 61761 Phone: 309/888-9567 Fax: 309/888-9556

Page 4

Period: 04/02/25 - 4/8/25

WeekEnd: 4/8/25

# **Certified Payroll**

Job: 11192 WASHINGTON POLICE EVIDENCE STORAGE

	ОТ		**		(5)				(6)	(7)	(8)	(9)	(10)	(11)
17 1	ОТ	~		urs an		1			Total	Rate	Project	Total Gross	Deductions	Net . Pay
Employee	or ST	Sun 04/06	Mon 04/07	Tue 04/08	Wed 04/02	Thu 04/03	Fri 04/04	Sat 04/05	l		Amount Earned	0.000	Deductions	· • • • • • • • • • • • • • • • • • • •
Cheek, Micah R.		Check#:				04/05	04/04	04/03	110415	0114,		Check#	FWT 75.00	
400 COVEY CT	ST	Спеск#: 	442300	Date:04	H11123	l	6.00		6.00	34.00	204.00	2040506	SWT 49.33	
NORMAL, IL 61761-1761	"						0.00		0.00	5	201.00	1	FICA 83.22 Union Ded 142.90 Deductions: 350.45	137 AS %
***-**-7021 M/EX: M/2	Prevailing Totals	4. 0	4 1	- 184 A 18	1 2 K-uf	र्वहरू	6.00-	Ginglerger 100 or	· ·6.00 :		204.00	(1,007.70(4)	Deddetions. 325.2. 973.1330.43	, chuchtag.
Race/Sex:A/M	IST		8.00	8.00	3.00	8.00	0.00	7. 2. 7	27.00	32.74	****	Pen 18.49	Welf 10.75 Vac 0.00 Ap	or 0.80 Other
Laborers L362	Non-Prevail	L.,,	8.00		3.00			year all are				Total 30.7		pr 0.00 Other
Journeyman	Empl Totals:							POWER.			1.087.90	4		
A/ LA/ J														
Ferree, Steven K.		Check#:	THE COMMENT STATEMENTS	Date:04	* xco-cox xxxcx	I 8.00			17.00	24.00	<b>570</b> 00		FWT 51.00 SWT 51.35	
441 N. PROMENADE ST	ST		6.00		3.00	8.00			17.00	34.00	578.00		CHILD SUPPOR: 142.85 FICA 44.21	
HAVANA, IL 62644-2644 ***-**-9053 M/EX: M/1													Union Ded 48.62 Deductions: 338.03	230 07
Race/Sex:W/M	Prevailing Total	10071152	6.00	1,27 J. 60 8/4 3.	3.00	38:00	*	BOOK TO SEE	× 17:00		578.00		Treductions 15, 200 18, 200 180	1.36,233,71
Laborers L231			* 0.00		3.00	3.00.00			17.00	0.00	370.00	7	Welf 10.75 Vac 0.00 Ap	or 0.80 Other
Journeyman	1	* , e2			· _	<u>.</u> Ger (8)	14 8377		3 1 4		8,500 1 48	Total 30.7		pr 0.00 Other
W/LA/J	Empl Totals:													
Howald, Derek		Check#:										V-9200 3 20 V-5 3 2 2	FWT 2.00	
224 W BEECH ST	ST			I	3.00	8.00			11.00	26.65	293.15		SWT 25.06 FICA 38.74	
CHILLICOTHE, IL 61523-1523												∵.506.35 <b>.</b> .÷	Union Ded 32.30 Deductions: 98.10	
	Prevailing Total	7.5	11 2	2785.02	a 3.00	. 8.00	99 2	মানিকার্ট্রাস্ট্রার্টর ।	11:00		293.15	1	·	
Race/Sex:W/M	ST						8.00		8.00	26.65	213.20	Pen 21.79	Welf 9.70 Vac 0.00 App	r 0.66 Other 0.
Carp L237 Peoria Zone1 70% Appr (1&2) Yrs	Non-Prevail			3-	1504 5	. 1,500	8.00	The Co	8.00			Total 32.6		
	Empl Totals:		<b>1889</b>	利的等级	3.00	8.00	8.00		19.00	<u> </u>	506.35			
W / CA / A							ANDRES SE						FWT 126.00	
Kneip, Will J.	ST	Check#;	242606	Date:04	T	1 000	l I	67,640,00	11.00	28.56	314.16		SWT 50.54	
557 HERITAGE DR	31				3.00	8.00			11.00	28.30	314.10		FICA 78.12 Union Ded 60.37	
MACKINAW, IL 61755-1755 ***-**-3460 M/EX: S/0				.,,.	2.00	200		V 4 - 2	14/00				Deductions:	AA 705.99
Race/Sex:M/M	Prevailing Total	-4. C 1. W		0.00	3.00	≈×8.00		Etystone	-		314.16	4	***********	0.66.04.0
Carp L237 Liv/Mclean	ST		8.00	8.00			8.00		24.00	28.56	685.44	Pen 21.79 Total 32.6	Welf 9.70 Vac 0.00 App	r 0.66 Other 0.
75% Appr (1&2) Yrs	Non-Prevail	N	9.00	0.50	1	18 m 18 17 m		2 343 3245 P.S.	0.50	42.84		10tai 32.0	, , , , , , , , , , , , , , , , , , ,	
M / CA / A	Empl Totals:							todáv (1907) Nadalakai			706.86	1		
Losey, Samuel L.	Empl Totals:	Check#:				8.00	<u> </u>		**33.3U···	, dodenie, ;	\$1.UZ1:UZ	Check#	FWT 69.00	
48 TIMBERLANE DR	ST	CHCCIDA	6.00				6.00		12.00	34.31	411.72	242608	SWT 33.97 CHILD SUPPOR: 174.60	1
MORTON, IL 61550-1550													FICA 52.50	
***-**-3567 M/EX: S/0													Union Ded 73.40 Deductions: 403.47	282.73
Race/Sex:W/M	Prevailing Total	Sales of the Sales	6.00	1.6 16.15	37735	390° - 1	· 6.00	30 Max	√-12.00		411.72			
Finishers L18A12 - Bldg	ST			8.00					8.00	34.31			Welf 9.00 Vac 0.00 App	r 0.83 Other 0.
Journeyman		5 ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (	* ; /					. j. )				Total 33.3	32	
W/CM/J	Empl Totals	A. CONTOUR DESCRIPTION OF THE PROPERTY OF THE	***************************************		CONTRACTOR AND AND AND	NONE PROPERTY.	6.00	ARREST FOR	20.00	33873373	686:20	C22000000000000	PW/P	
Mccaw, Paul D.		Check#:	242613	Date:04	/11/25		ı ı		0.00	20.07	204.56		SWT 46.64	
5305 N. HUMBOLDT	ST					8.00			8.00	38.07	304.56		FICA 72.07 Union Ded 56.61	
PEORIA HEIGHTS, IL 61616-1610 ***-**-2958 M/EX: S/0												£942.23	Deductions: 284.32	<b>657.91</b> 。
Race/Sex:W/M	Prevailing Total	jepa const	Y , G,	1. C. 1. 19804	000000	₹8.00	3	1.000		^		1		
Carp L237 Peoria Zone1	ST		8.00	8.00					16.00	38.07			Welf 9.70 Vac 0.00 App	r 0.66 Other 0.
Journeyman	TO		0.00	0.50					0.50	57.10		Total 32.6	00	
W/CA/J	Non-Prevail Empl Totals:	2423-5054°2	8.00		SASSINE		. 186 - 9 X	A JAN		interior ye		4		
	Empl Totals:	THE REPORT OF THE PARTY OF THE	×**8:00	გ.ა0: I	535568A558	8.00	4. 14.	170@#90E	∴\$24.50° 	<u> </u>	942.23	1		
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	l													
				SB	E 48 (I	Rev. 09	/11/20)						10691 PRCertifiedP	aySQL.rpt



Peoria Office: 107 N. Commerce Place - Peoria, IL 61604 Phone: 309/688-9567 Fax: 309/688-9556

Bloomington/Normal Office: 117 Merle Lane - Normal, IL 61761 Phone: 309/888-9567 Fax: 309/888-9556

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Period: 04/02/25 - 4/8/25

WeekEnd: 4/8/25

# **Certified Payroll**

Job: 11192 WASHINGTON POLICE EVIDENCE STORAGE

(1) (2) (3) (4)		OT				(5)			-	(6)	(7)	(8)	(9) Total	(10)	(1) Ne	/
Employee		OT or ST	Sun 04/06	Ho Mon 04/07	Tue 04/08	Wed 04/02	s work Thu 04/03	Fri 04/04	Sat 04/05	Total Hours	Rate	Project Amount Earned	Gross	Deductions		
Ramirez, Pedro J.E		51	Check#:				04/03	04/04	04/05	Hours		- Eurneu	Check#	FWT	5.00	
2056 W RACE AVE CHICAGO, IL 60612-0612		ST	CHECKIT.	242373	DAIC.U.	6/41/25:		6.00		6.00	34.31	205.86	242575	SWT FICA Union Ded	10.19 15.76 22.02 52.97 , 152.	89 🎝 🚉
***-**-5741 M/EX: S/1 Race/Sex:H/M	Prevailing	Total		18.2.2.18	2 ' ' **	3	12:00	6.00	# OF 1807	6.00		205.86				
Cace/Sex. Fi/M	( Neva 104										0.00		.1	2 Welf 9.00 Vac 0.0	0 Appr 0.83 (	Other 0.2
ourneyman	1. A.A.A.	, 9	1 ( No. 1) ( 1)	, sú	\$ - * w.		*() *(\shi^2)		. Y	£( V _,(		, . %	Total 33.	.32		
H/CM/J	Empl Tot	als: 🎨 🖫	50% Mag 2 1	\$(\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1300			6.00		.~6.00∶ I	<u> </u>	205:86				
Seiler, Jay D. 5106 EAST ROME ROAD CHILLICOTHE, IL 61523-1523 *******7324 M/EX: S/2		ST	Check#:	11025 I 2.00	)ate:04/	<b>10/25</b> 3.00		4.00		9.00	40.82	367.38	Check # 41025	SWT VEHICLE USE FICA Union Ded	154.00 60.43 15.00 100.39 62.65 392.47	72 .
Race/Sex:W/M	Prevailing	Total	F + 1	~ 2.00	^ · · · ·	3.00	5,5 .1	4.00	S N 22 8	9.00		367.38	-3	· •,,,		37
Carp L237 Peoria Zonel		ST		6.00	8.00	3.00	5.00	4.00		23.00	41.08		Pen 21.79	9 Welf 9.70 Vac 0.0	0 Appr 0.66 0	Other 0.4
Superintendent	Non-Prev		× . e.gs	6.00		12 0 V			448			· 944.81	Total 32.		••	
W/CA/J	Empl Tota		7 m 7 /m V	8.00				8 00	Egg: 10.70		<u> </u>		1			
Sprague, Tyler C. 307 W LAFAYETTE ST AVON, IL 61415-1415	22407 200		Check#:				8.00			12.00	34.31	411.72	Check # 242624	SWT FICA Union Ded	63.00 40.76 62.99 88.08 254.83	<u>61; ; ;</u>
***-**-1275 M/EX: M/0	Prevailing	Total	· 54.8 ° .	4.00	J 1 1245	5 , 9 *	. 8.00	4×.		^ 12.00		411.72				
Race/Sex:W/M Finishers L18A12 - Bldg		ST				4.00		8.00		12.00	34.31	411.72	Pen 23.22	2 Welf 9.00 Vac 0.0	0 Appr 0.83 0	Other 0.2
funsilers L16A12 - Blug fourneyman	Non-Prev			istor, sich.		.,,,,	۰, ,		100	12.00		411.72	Total 33.	.32		
W/CM/J	Empl Tot	als: 🔭	18-90-90 P.	4.00	(1)	4.00	8.00	8.00		24.00	<u> 12. Pag</u>	₹ 823.44°				
Teel, Nathan E. 16497 E MOHAWK DR CUBA, IL 61427-1427 ***-**-0106 M/EX: M/0		ST OT	Check#:	41025 I	Date:04/	/10/25	8.00 1.00	6.00		14.00 1.00	38.02 57.03	532.28 57.03	Check # 41025	SWT VEHICLE USE FICA Union Ded	81.00 47.99 9.00 74.17 82.25 294.41 (2.675.	10
Race/Sex:W/M	Prevailing	Total	* * * * * * *	58.,5	3 % 25 j	Sec. 3 4	9.00	6.00		15.00		589.31	]			
Finishers L18A539-Bldg	1	ST				8.00		2.00		10.00	38.02			Welf 10.00 Vac 0.	00 Appr 0.74	Other 0
Superintendent	Non-Prev			,t.»	# 1 P		4,5,4,	2.00		20100	,	380.20	Total 27.	.72		
W/CM/J	Empl Tota	ıls.	MCNR ENE		State State	8.00	9.00	8.00		25.00	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	969.51				
Period: 04/02/25 - 4/8/25 Job Totals	Ho	urs	Sun 4/06	Mon 4/07	Tue 4/08	Wed 4/02	Thu 4/03	Fri 4/04	Sat 4/05	Total		Project Amounts	To Gr	Deduct	ions	Net Pay
		ST	0.00	18.00	0.00	12.00	48.00	28.00	0.00	106.00		3,622.83	9,102	2.21 3,078.	49 6,0	23.72
		ОТ	0.00	0.00	0.00	0.00	1.00	0.00	0.00	1.00		57.03			•	
		DT	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00				

Page 6 WeekEnd: 4/8/25

## **Certified Payroll**

Period: 04/02/25 - 04/08/25

Job# 11192 - 11192 WASHINGTON POLICE EVIDENCE STORAGE

#### **AFFIDAVIT**

Weekly Statement of Compliance

-		
Date:	5/1	/2025

I,	Kaleb Wagenbach	Payroll Mgr
	(Name of Signatory Party) creby state: That I pay of e persons employed on the	

Job:11192 WASHINGTON POLICE EVIDENCE STORAGE
(Name of the Project)

that during the payroll period commencing on the

 $\frac{2}{8}$  day of April ,  $\frac{2025}{2025}$  and ending the

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said P. J. HOERR, INC.

(Contractor or Subcontractor)

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 persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates contained therin are not less than the actual rates herein stated and that the classification set forth for each laborer or mechanic conform to the work he/she performed.

Signature

Digital Signature

#### **FRINGES**

#### Health Fund

- 5000 CARPENTERS FRINGE BENEFIT FUND P.O. BOX 94416 CHICAGO, IL 60690-4416 1-800-448-5825
- 5010 CENTRAL II. CARPENTERS H & W 200 S. MADIGAN DRIVE LINCOLN, IL 62656 (217)-732-1919
- 5040 CENTRAL LAB FRINGE BEN FUNDS P.O. BOX 1267 JACKSONVILLE, IL 62651-1267 217-243-8521
- 5080 NCILHWF DISTRICT COUNCIL 4208 W. Partridge Way Unit 3 Peoria, IL 61615-5650 309-692-0860
- 5090 LABORERS L231 CLEARING ACCOUNT P.O. BOX 374 2503 BROADWAY PEKIN. IL 61554 309-347-7519
- 5283 PLASTERS & CEMENT MASONS L18 C/O QUORUM CONSULTING GROUP SPRINGFIELD, IL 62711 1-800-440-1548
- 5370 INDIANA STATE COUNCIL WELFARE FUNDS P.O. BOX 47489 INDIANAPOLIS, IN 46247 (800) 403-0423

#### Pension Fund

- 5000 CARPENTERS FRINGE BENEFIT FUND P.O. BOX 94416 CHICAGO, IL 60690-4416 1-800-448-5825
- 5010 CENTRAL IL CARPENTERS H & W 200 S. MADIGAN DRIVE LINCOLN, IL 62656 (217)-732-1919
- 5040 CENTRAL LAB FRINGE BEN FUNDS P.O. BOX 1267 JACKSONVILLE, IL 62651-1267 217-243-8521
- JACKSONVILLE, IL 62651-1267 217-243-852 5090 LABORERS L231 CLEARING ACCOUNT P.O. BOX 374 2503 BROADWAY PEKIN, IL 61554 309-347-7519
- 5282 PLASTERS & CEMENT MASON L18 C/O QUORUM CONSULTING GROUP SPRINGFIELD, IL 62711 1-800-440-1548-106
- 5283 PLASTERS & CEMENT MASONS L18 C/O QUORUM CONSULTING GROUP SPRINGFIELD, IL 62711 1-800-440-1548

#### **SUBCONTRACTORS**

Attach explanation of Monies paid, copy of contract of billing, or other pertinent information.

Company Name:	P. J. HOERR, INC.	
Contact person:		
107 N. COMMERO	CE PLACE	

(Address)

(State)

61604

(Zipcode)

Telephone Number: (309) 688-9567

(City)

PEORIA



Peoria Office: 107 N. Commerce Place - Peoria, IL 61604 Phone: 309/688-9567 Fax: 309/688-9556 Bloomington/Normal Office: 117 Merle Lane - Normal, IL 61761 Phone: 309/888-9567 Fax: 309/888-9556

Page 1

Period: 03/26/25 - 4/1/25

WeekEnd: 4/1/25

# **Certified Payroll**

Job: 11192 WASHINGTON POLICE EVIDENCE STORAGE

(1) (2) (3) (4)		.			(5)		_		(6)	(7)	(8)	(9)	(10)	(11)
	Ol		Но	urs an		s worl	<u>ked</u>		T-4-1	D.4.	Project	Total Gross	Dadaatia	Net 18 Pay
Employee	or	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Total	Rate	Amount	G1 033	Deduction	18 1 ay
	ST	03/30	03/31	04/01	03/26	03/27	03/28	03/29	Hours	of Pay	Earned			
Ferree, Steven K.		Check#:		A	1							Check#	FWT SWT	166.00 99.60
41 N. PROMENADE ST	ST	.	8.00	8.00	8.00	0.50	8.00		32.50		1,105.00	242536	CHILD SUPPORT	142.85 118.79
IAVANA, IL 62644-2644	OT				1.00	3.00			4.00	51.00	204.00	1 552 55	FICA Union Ded	133.15
**-**-9053 M/EX: M/1 Race/Sex:W/M	Prevailing Tot	al: v ";	8.00	÷ *8.00	9.00	3.50	8.00	ri ngalagyay sa	:26.50	<u>i</u>	1,309.00	1,332. /3	Deductions: ***	660.39 * * 892,36
aborers L231	ST		3.00	~ ~8.00	37.00	7.50	8,00	- Black To Lea Cet	7.50	32.50		Den 18 40	Welf 10 75 Vac 0	.00 Appr 0.80 Othe
ourneyman	Non-Prevail	ــــــــــــــــــــــــــــــــــــــ	<u> </u>	W.Z. 15.	2	7.50 3.7:50		J. 710 . M	<u> </u>	32.30		Total 30.		.oo Appr o.oo Ome
W / LA / J	Empl Totals:	R458453768	8.00				8.00	SASSAGRAS				i		
Iowald, Derek	Lampi Totals, 3	Check#:				11.00	0.007				1,002.10	Check#	FWT	72.00
24 W BEECH ST	ST			8.00		1		**************************************	8.00	26.65	213.20	242544	SWT FICA	56.72 87.65
HILLICOTHE, IL 61523-1523	ОТ		1	1.00					1.00	39.98	39.98	1,145.88	Union Ded Deductions:	70.36 286.73 859.15
ŕ	Prevailing Tot	al Caller	30-7 Gar	÷ 9.00	PAR M	18586.815	t the	· 1986年1986年	9:00		253.18	, , , , , , , , , , , , , , , , , , ,	XU CAC C 2 24 G 9" 4 KMAC	
lace/Sex:W/M	IST		8.00	2,100/	8.00	8.00	8.00		32.00	26.65		Pen 21.79	Welf 9.70 Vac 0.0	00 Appr 0.66 Other
arp L237 Peoria Zonel	то		0.00		1.00				1.00	39.98		Total 32.		••
0% Appr (1&2) Yrs	Non-Prevail	<del>****</del>	8.00	\$5,00 Y		8:00	<sup>-,</sup> 8.00	J. 1866 P. 1870 P.	33.00	_		1		
W/CA/A	Empl Totals:		8.00	9.00	9.00	8.00	8.00		42.00	225年25年1	1.145.88			
neip, Will J.		Check#:	242547	Date:04			100					Check #	FWT SWT	176.00 61.85
57 HERITAGE DR	ST		8.00	8.00	8.00	8.00	8.00		40.00		1,142.40	242547	FICA Union Ded	95.57 72.27
ACKINAW, IL 61755-1755	OT		1	1.00	1.50				2.50	42.84	107.10	<b>1,249.50</b>	Deductions:	405.69
**-**-3460 M/EX: S/0	Prevailing Tot	al 🗥 👉 💸	≥ 8.00	× 9.00	9.50	8.00	8.00	, SANKERS.	42.50		1,249.50			
lace/Sex:M/M  arp L237 Liv/Mclean										. 0.00		1		00 Appr 0.66 Other
5% Appr (1&2) Yrs	1 77 3			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								Total 32.	60	
M / CA / A	Empl Totals:		8.00	9.00	9.50	8.00	8.00	en Color (A) year	42.50	K. Carton	1.249.50	4		
Accaw, Paul D.	<del></del> -	L Chanter	 242554	Dataril	  /0 <i>4/</i> 25	l						Check #	FWT	268.00
305 N. HUMBOLDT	ST		8.00	8.00	104123				16.00	38.07	609.12	242554	SWT FICA	82.45 127.43
EORIA HEIGHTS, IL 61616-1616	l om	1	0.00	1.00					1.00	57.11	57.11	\$1.66 <b>5</b> 57 78	Union Ded	98.19 576.07 1,089.50
**-**-2958 M/EX: S/0	Prevailing Tot	al	8.00	9:00	5.012	(3855).C	1,550	7-8-63-0-C-	17.00		666.23	; Lj005.5,7 %.7	,Deductions.	files i nin 18 de les titus princis y
lace/Sex:W/M	ST		7.8.00	*.29.00	8.00	8.00	8.00	200000000000000000000000000000000000000	24.00	38.07		Pen 21 79	Welf 9 70 Vac 0 (	00 Appr 0.66 Other
arp L237 Peoria Zone1	TO	1	1		1.50	8.00	8.00		1.50	57.11	85.66	Total 32.		oo rippi o.oo omei
ourneyman	Non-Prevail		. 25 , 5/3 5		9:50	8.00	° 8 00 3	The office of the second			999.34	1		
W / CA / J	Empl Totals:							resident state			1.665.57	1		
leyer, Matthew M.		Check#:										Check #	FWT SWT	139.00 71.91
05 N BROADWAY	ST					8.00	8.00		16.00	38.07	609.12	242555	FICA	111.14
1ANITO, IL 61546-1546			1									1,452,75	Union Ded Deductions:	85.02 407.071,045.68
**-**-8427 M/EX: M/0	Prevailing Tot	al	2355	2. 30 15 25	440.65%	<b>8.00</b>	. 38:00	The State of	16.00		609.12			
lace/Sex:W/M larp L237 Peoria Zone1	ST		8.00	8.00	7.00				23.00	36.68				00 Appr 0.66 Other
arp L23 / Feoria Zoner	Non-Prevail 6							36.4%、36%		ٔ حیثگیت	843.63	Total 32.	60	
ournevman		P20/XEE28/02/2	8.00	8.00	7.00	8.00	8:00	NAME	39.00		1,452.75	]		
	Empl Totals:	- A. 2575 Feb. 15 abs. 20. 190.					1		l					176.00
W / CA / J	Empl Totals:			D 4 0	10405									
W / CA / J Ramirez, Pedro J.E					/04/25		(B)	l	0.50	3/1 32	17 16	Check # 242561	SWT	65.81
W / CA / J Ramirez, Pedro J.E 056 W RACE AVE	ST	 Check#:		0.50	/04/25					34.32 51.47	17.16 102 93	242561	SWT FICA Union Ded	65.81 101.71 133.96
W/ CA/ J  Ramirez, Pedro J.E 056 W RACE AVE HICAGO, IL 60612-0612	ST	Check#:	242561 -	0.50 2.00					2.00	51.47	102.93	242561	SWT FICA Union Ded	65.81 101.71
W/ CA/ J Ramirez, Pedro J.E 056 W RACE AVE HICAGO, IL 60612-0612 ****-5741 M/EX: S/1	ST OT Prevailing Tot	Check#:		0.50 2.00 2.50	14246.50			- 2367-467-82	2.00 ≥ 2.50	51.47	102.93 120.09	242561	SWT FICA Union Ded Deductions: >> Questions	65.81 101.71 133.96 -477.48於京元852.04 (金元)
W/ CA/ J  Camirez, Pedro J.E  D56 W RACE AVE  HICAGO, IL 60612-0612  ****5741 M/EX: S/1  ace/Sex:H/M  inishers L18A12 - Bldg	ST OT Prevailing Tot	Check#:	242561 -	0.50 2.00	8.00				2.00 32.50 31.50	51.47  34.31	102.93 1,080.77	242561 1,329:52 Pen 23.22	SWT FICA Union Ded Deductions: ************************************	65.81 101.71 133.96
W/ CA/ J  Camirez, Pedro J.E  D56 W RACE AVE  HICAGO, IL 60612-0612  ****5741 M/EX: S/1  ace/Sex:H/M  inishers L18A12 - Bldg	ST OT Prevailing Tot ST OT	Check#:	242561	0.50 2.00 2.50 7.50	8.00 2.50	8.00	8.00	-2363-46765	2.00 32.50 31.50 2.50	51.47  34.31 51.46	102.93 1,080.77 128.66	242561	SWT FICA Union Ded Deductions: ************************************	65.81 101.71 133.96 -477.48 <sub>計</sub> 余次,852.04 / 集
W/ CA/ J  Camirez, Pedro J.E  D56 W RACE AVE  HICAGO, IL 60612-0612  ****5741 M/EX: S/1  ace/Sex:H/M  inishers L18A12 - Bldg	ST OT Prevailing Tot ST OT Non-Prevail	Check#:	242561	0.50 2.00 2.50 7.50	8.00 2.50 10.50	8.00	₹.00 8.00		2.00 31.50 2.50 2.50 2.50	51.47 34.31 51.46	102.93 120.09 1,080.77 128.66 1,209.43	242561 1,329:52 Pen 23.22	SWT FICA Union Ded Deductions: ************************************	65.81 101.71 133.96 -477.48 <sub>計</sub> 余次,852.04 / 集
W/ CA/ J Ramirez, Pedro J.E  056 W RACE AVE HICAGO, IL 60612-0612  ***-**-5741 M/EX: S/1 tace/Sex:H/M inishers L18A12 - Bldg ourneyman	ST OT Prevailing Tot ST OT	Check#:	242561	0.50 2.00 2.50 7.50	8.00 2.50 10.50	8.00	₹.00 8.00		2.00 31.50 2.50 2.50 2.50	51.47 34.31 51.46	102.93 120.09 1,080.77 128.66 1,209.43	242561 1,329:52 Pen 23.22	SWT FICA Union Ded Deductions: ************************************	65.81 101.71 133.96 -477.48 <sub>計</sub> 余次,852.04 / 集
W/ CA/ J Ramirez, Pedro J.E  056 W RACE AVE HICAGO, IL 60612-0612  ****-*5741 M/EX: S/1 Lace/Sex:H/M inishers L18A12 - Bldg purneyman	ST OT Prevailing Tot ST OT Non-Prevail	Check#:	242561	0.50 2.00 2.50 7.50	8.00 2.50 10.50	8.00	₹.00 8.00		2.00 31.50 2.50 2.50 2.50	51.47 34.31 51.46	102.93 120.09 1,080.77 128.66 1,209.43	242561 1,329:52 Pen 23.22	SWT FICA Union Ded Deductions: ************************************	65.81 101.71 133.96 -477.48 <sub>計</sub> 余次,852.04 / 集
W/ CA/ J Camirez, Pedro J.E  D56 W RACE AVE HICAGO, IL 60612-0612  ****-\$741 M/EX: S/1 ace/Sex:H/M inishers L18A12 - Bldg purneyman	ST OT Prevailing Tot ST OT Non-Prevail	Check#:	242561	0.50 2.00 2.50 7.50	8.00 2.50 10.50	8.00	₹.00 8.00		2.00 31.50 2.50 2.50 2.50	51.47 34.31 51.46	102.93 120.09 1,080.77 128.66 1,209.43	242561 1,329:52 Pen 23.22	SWT FICA Union Ded Deductions: ************************************	65.81 101.71 133.96 -477.48 <sub>計</sub> 余次,852.04 / 集
W/ CA/ J  amirez, Pedro J.E  D56 W RACE AVE  HICAGO, IL 60612-0612  ****-\$741 M/EX: S/1  ace/Sex:H/M  nishers L18A12 - Bldg  purneyman	ST OT Prevailing Tot ST OT Non-Prevail	Check#:	242561	0.50 2.00 2.50 7.50	8.00 2.50 10.50	8.00	₹.00 8.00		2.00 31.50 2.50 2.50 2.50	51.47 34.31 51.46	102.93 120.09 1,080.77 128.66 1,209.43	242561 1,329:52 Pen 23.22	SWT FICA Union Ded Deductions: ************************************	65.81 101.71 133.96 -477.48 <sub>計</sub> 余次,852.04 / 集集



Peoria Office: 107 N. Commerce Place - Peoria, IL 61604 Phone: 309/688-9567 Fax: 309/688-9556

Bloomington/Normal Office: 117 Merle Lane - Normal, IL 61761 Phone: 309/888-9567 Fax: 309/888-9556

Page 2

Period: 03/26/25 - 4/1/25

WeekEnd: 4/1/25

# **Certified Payroll**

Job: 11192 WASHINGTON POLICE EVIDENCE STORAGE

(1) (2) (3) (4)						(5)				(6)	(7)	(8)	(9)	(10)		(11)	
	(	от		Но	urs an	d Day	s work	ed				Project	Total			Net	
Employee		or	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Total	Rate	Amount	Gross	Deduction	ons	Pay	
	\$	ST	03/30	03/31	04/01	03/26	03/27	03/28	03/29	Hours	of Pay	Earned					
Seiler, Jay D.			Check#:4	10325 I	)ate:04/	03/25							Check #	FWT SWT	225.00 76.34		
5106 EAST ROME ROAD	2	ST		4.00	4.00	3.00	4.00	4.00		19.00	40.82	775.58	40325	VEHICLE USE	15.00		
CHILLICOTHE, IL 61523-1523		ı												FICA Union Ded	124.95 91.07		
***-**-7324 M/EX: S/2		T- 1-1		1.00	4.00	~ 2.00	24° 00	. 4.00	92 (St. Zw. h	10.00		775 50	£1,633,50	Deductions:	. <b>37.532,36</b> √	1,101.14	
Race/Sex:W/M Carp L237 Peoria Zone1	Prevailing		Angeles el	4.00	<i>₹</i> .4:00			4.00	<b>《於金约4</b>		40.05		D 21 70	W-160 70 W	0.00 4	0.66.045	0.45
Superintendent		ST		4.00	4.00	5.00	4.00	4.00	* de/** dod **	21.00	40.85		Total 32.	Welf 9.70 Vac	0.00 Appr	0.00 Other (	J.43
	Non-Prevai		NSSAFFORCE-WAS	4.00	4.00 8.00	5.00	4.00	8:00	SAMPLE CONTRACTOR			1,633.50		00			
W/CA/J	Empl Totals		Check#:4			Commercial	8.00	8.00		***********	* 7-,, 3	71.055:50	Check #	FWT	402.00		
Teel, Nathan E.		st Î	CHECK#3	5.00	5.50	2.00	5.00	8.00		25.50	38.02	969.51	40325	SWT VEHICLE USE	138.80 15.00		
16497 E MOHAWK DR CUBA, IL 61427-1427		от		1.00	4.50	1.00	3.00	0.00		6.50	57.03	370.70		FICA	214.50		
***-**-0106 M/EX: M/0	'	٠٠ <u> </u>		1.00	1.50	1.00				0.50	07.00	5,0,,0	2,803.99	Union Ded Deductions:	205.63 9 <b>75.93</b>	1,828.06	
Race/Sex:W/M	Prevailing	Total	\$44. \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	6.00	10.00	3.00	≆≥5'.00	*8.00	1,089,000,000	32.00	ن شپسک	1,340.21					
Finishers L18A539-Bldg		ST		3.00	2.50	6.00	3.00	,		14.50	38.02			Welf 10.00 Vac	0.00 App	r 0.74 Other	0.28
Superintendent	1.	от		4.00		7.50	4.50			16.00	57.03	912.49	Total 27.	72			
W/CM/J	Non-Prevai	il .	7. F 37 A	7.00	~2:50	13.50	<b>⊗ 7.50</b> .	ý, ,		,30.50		1,463.78	1				
	Empl Totals	S. 489	的。這個學	13.00	12.50	16.50	12.50	8.00	ž (4,16,-7)	62.50	<u> Milanina</u>	2:803.99					200000000000
Period: 03/26/25 - 4/1/25			O	Mon	Т	Wed	Thu	Fri	Sat	Total		Project	To	tal Dode	ctions-	Net	X 2014 (2.7
			Sun	1.00 May 1.00 M	Tue		200 C	1 4 1 1 1 1 1 1		IULAI		Amounts	Gr	ossDeut	icnons-	T Pay	
Job Totals	Hou	2000 2000	3/30	3/31	4/01	3/26	3/27	3/28	3/29	1.0	or Albert				9.7		
	\$	ST	0.00	33.00	42.00	21.00	25.50	36.00	0.00	157.50		5,441.09	22,580	).67 7,7	04.01	14,876.66	)
	(	от	0.00	1.00	9.50	3.50	3.00	0.00	0.00	17.00		881.82					
	]	DT	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00					_

Page 3

WeekEnd: 4/1/25

## **Certified Payroll**

Period: 03/26/25 - 04/01/25

Job# 11192 - 11192 WASHINGTON POLICE EVIDENCE STORAGE

#### **AFFIDAVIT**

Weekly Statement of Compliance

I,	Kaleb W	agenbach	Payroll Mgr
	(Name of Sig	natory Party)	(Title)
do he	ereby state:	That I pay or	supervise the payme
of the	e persons emp	oloyed on the p	ublic works project

Job:11192 WASHINGTON POLICE EVIDENCE STORAGE
(Name of the Project)

that during the payroll period commencing on the

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said P. J. HOERR, INC.

(Contractor or Subcontractor

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 persons, other than permissible deductions as defined by Federal and/or State Law. I further certify that this payroll is correct and complete; that the wage rates contained therin are not less than the actual rates herein stated and that the classification set forth for each laborer or mechanic conform to the work he/she performed.

Signature Signature

Digital Signature

#### **FRINGES**

#### Health Fund

- 5000 CARPENTERS FRINGE BENEFIT FUND P.O. BOX 94416
- CHICAGO, IL 60690-4416 1-800-448-5825 5010 CENTRAL IL CARPENTERS H & W 200 S. MADIGAN DRIVE
- LINCOLN, IL 62656 (217)-732-1919
  5080 NCILHWF DISTRICT COUNCIL
  4208 W. Partridge Way Unit 3
  Peoria, IL 61615-5650 309-692-0860
- 5090 LABORERS L231 CLEARING ACCOUNT P.O. BOX 374 2503 BROADWAY PEKIN, IL 61554 309-347-7519
- 5283 PLASTERS & CEMENT MASONS L18 C/O QUORUM CONSULTING GROUP SPRINGFIELD, IL 62711 1-800-440-1548
- 5370 INDIANA STATE COUNCIL WELFARE FUNDS P.O. BOX 47489 INDIANAPOLIS, IN 46247 (800) 403-0423

#### Pension Fund

- 5000 CARPENTERS FRINGE BENEFIT FUND P.O. BOX 94416
- CHICAGO, IL 60690-4416 1-800-448-5825 5010 CENTRAL IL CARPENTERS H & W 200 S. MADIGAN DRIVE L DICOLD IL 62656 (212) 272 1010
- LINCOLN, IL 62656 (217)-732-1919 5040 CENTRAL LAB FRINGE BEN FUNDS P.O. BOX 1267
- JACKSONVILLE, IL 62651-1267 217-243-8521 5090 LABORERS L231 CLEARING ACCOUNT P.O. BOX 374 2503 BROADWAY PEKIN, IL 61554 309-347-7519
- 5282 PLASTERS & CEMENT MASON L18 C/O QUORUM CONSULTING GROUP SPRINGFIELD, IL 62711 1-800-440-1548-106
- 5283 PLASTERS & CEMENT MASONS L18 C/O QUORUM CONSULTING GROUP SPRINGFIELD, IL 62711 1-800-440-1548

#### **SUBCONTRACTORS**

(City)

Telephone Number: (309) 688-9567

Attach explanation of Monies paid, copy of contract of billing, or other pertinent information.

Company Name:	P. J. HOERR, IN	C.
Contact person:		
107 N. COMMER	CE PLACE	
PEORIA	(Address) IL	61604

(State)

(Zipcode)

**Certified Payroll Report** 

Contractor LASER ELECTRIC, INC.

P. O. BOX 5008 3611 SW ADAMS ST

PEORIA, IL 61601-5008

Project HOERR, P.J. CONSTRUCTION: 24-209NT WASHINGTON PES Project/Contract #
ATTENTION: 516016 Payroll Number
107 COMMERCE PLACE For Week Ending

PEORIA, IL 61604

11192516016 2

4/23/2025

Hours Worked by Day

		Work	Pay	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Timesheet	Paid	Pay	Job	Fringe Check	Total	Social	Medi-	Federal	State		Total	
Employee Name	ID	Classification	Type	17	18	19	20	21	22	23	Hours	Hours	Rate	Gross Pay	Rate Number	r Gross Pay	Security	care	Tax	Tax	Other	Deduct	Net Pay
Ruhaak, Michael W.	2024	ST Journeyman	RT	8.00	8.00			8.00	6.00	8.00	38.00	38.00	44.10	1,675.80	0.00 DD321	16 1,675.80	103.90	24.30	226.00	82.95	65.85	503.00	1,172.80
														1	l								

I, Gretche	n L. Martin, Corp. Sec., do hereby state:		
employed	on the said project have been paid the full weekly wages earned, that no rebates have been or will	IOERR, P.J. CONSTRUCTION: 24-209NT WASHINGTON PES; that during the payroll period commencing on Apr-17, 2025 and ending be made either directly or indirectly to or on behalf of said LASER ELECTRIC, INC. from the full weekly wages earned by any person, oth ct, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat 357; 40 U.S.C. 276c), and described below:	
	ny payrolls otherwise under this contract required to be submitted for the above period are correct a ad into the contract; that the classifications set forth therein for each laborer or mechanic conform w	nd complete; that the wage rates for laborers and mechanics contained therein are not less than the applicable wage rates contained in ith the work he performed.	any wage determination
	y apprentices employed in the above period are duly registered in a bona fide apprenticeship prog sts in a State, are registered with the Bureau of Apprenticeship and Training, United States Depart	ram registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor.	of Labor, of if no such recognized
(4) That			
(a) W⊦	ERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the except as noted in Section 4(c) below.	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,
(b) Wł	ERE FRINGE BENEFITS ARE PAID IN CASH  Each laborer or mechanic listed in the above referenced payroll has been paid, as indic except as noted in Section 4(c) below.	ated on the payroli, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe ben	efits as listed in the contract,
(c) EX	CEPTIONS		
	Exception (Craft)	Explanation	
,			
	Remarks:		
	Name and Title	Canadara	1 1
	Gretchen L. Martin, Corp. Sec.	Signature Phon-Lann & Wasteral	

Date: Apr-30, 2025

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.

**Certified Payroll Report** 

Contractor LASER ELECTRIC, INC.

P. O. BOX 5008 3611 SW ADAMS ST PEORIA, IL 61601-5008

Project

HOERR, P.J. CONSTRUCTION: 24-209NT WASHINGTON PES Project/Contract #
ATTENTION: 516016 Payroll Number
107 COMMERCE PLACE For Week Ending

11192516016

ATTENTION: 516016 107 COMMERCE PLACE PEORIA, IL 61604

4/16/2025

Hours Worked by Day

		Work	Pay	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Timesheet	Paid	Pay	Job	Fringe	Check	Total	Social	Medi-	Federal	State		Total	
Employee Name	ID	Classification	Type	10	11	12	13	14	15	16	Hours	Hours	Rate	Gross Pay	Rate	Number	<b>Gross Pay</b>	Security	care	Tax	Tax	Other	Deduct	Net Pay
Ruhaak, Michael W.	2024	ST Journeyman	RT						8.00	8.00	16.00	16.00	44.10	705.60	26.60	DD32059	1,764.00	109,37	25.58	245.00	87.32	69,32	536,59	1,227.41

Date: Apr-30, 2025 I, Gretchen L. Martin, Corp. Sec., do hereby state:		
(1) That I pay or supervise the payment of the persons employed by LASER ELECTRIC, INC. on the project HO employed on the said project have been paid the full weekly wages earned, that no rebates have been or will be as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act,	DERR, P.J. CONSTRUCTION: 24-209nt WASH PD EVID STRG; that during the payroll period commencing on Apr-10, 2025 and ending made either directly or indirectly to or on behalf of said LASER ELECTRIC, INC. from the full weekly wages earned by any person, other, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat 357; 40 U.S.C. 276c), and described below:	g on Apr-16, 2025 all persons er than permissible deductions
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with	d complete; that the wage rates for laborers and mechanics contained therein are not less than the applicable wage rates contained in an	ny wage determination
(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department	m registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of ent of Labor.	Labor, of if no such recognized
(4) That:  (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS  in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the abeccept as noted in Section 4(c) below.	pove referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the t	penefit of such employees,
(b) WHERE FRINGE BENEFITS ARE PAID IN CASH  Each laborer or mechanic listed in the above referenced payroll has been paid, as indicate except as noted in Section 4(c) below.	ted on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe bene	fits as listed in the contract,
(c) EXCEPTIONS		
Exception (Craft)	Explanation	
Remarks:		

Name and Title Gretchen L. Martin, Corp. Sec.	Signature Gretchen L Martin
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CON 231 OF TITLE 31 OF THE UNITED STATES CODE.	NTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION

#### WAIVER OF LIEN TO DATE

STATE OF ILLINOIS COUNTY OF :				Date 4/15/2025 Check# 1630	- ,
TO WHOM IT MAY WHEREAS the under	signed has been employ	ed by P.J. Hoerr, I	nc. to furnish materials, lab	Pay Application	
	_		N POLICE EVIDENCE ST	<u>FORAGE</u>	:- 4b
				ner videranius der ausgebeitet geschaften die der der beschaft die Seiter	is the owner.
\$75,024.00 waive and release any respect to and on said furnished, and on the	Dollars, and other good and all lien or claim of d above-described prem monies funds or other of	I and valuable consider f, or right to, lien, unden nises, and the improver considerations due or to	asand Twenty-Four And X ations, the receipt whereof is or the statutes of the State of ments thereon, and on the so become due from the own gned for the above described	s hereby acknowledge f Illinois, relating to r material, fixtures, app ner, on account of lab	mechanics' liens, with paratus or machinery
Given under my/our h	and(s) and seal this	st day of	May Stypho f	, 20	25
	;	Signature and Seal:	Light !	Aller .	, , , , , , , , , , , , , , , , , , ,
NOTE: All waivers must be should be set forth; if waive	e for the full amount paid. If we are for a partnership, the part	vaiver is for a corporation , conners name should be used, p	orporate name should be used, cor artner should sign and designate h	porate seal affixed and title imself as partner.	of officer signing waiver
STATE OF ILLINOIS COUNTY OF :		CONTRACTO	OR'S AFFIDAVIT		
TO WHOM IT MAY THE undersigned, do	CONCERN: uly affirmed, deposes an	d says that he is (Title)	Stephen Pollack - Vice	e President	
of	HEIN CC	DNSTRUCTION CO.	inc.	who is the	subcontractor for the
·. 1	materials, labor, equi	pment, and/or hired v	endors as per the prime co	ntract agreement	
work on the	er va	WASHINGTON P	OLICE EVIDENCE STO	RAGE	
building located at owned by		115 W JEFFERSON	N STREET, WASHINGTO	ON, IL 61571	
	THE A , MAN AND AND	- 1	r(s) is \$120,957.00	on which he has	monitored novement of
that there is no claim of furnished material or l material entering into	prior to the either legal or equitable abor, or both, for said v	nis payment. That all we to defeat the validity of work and all parties have and the amount due or	aivers are true, correct, and f said waivers. That the fo- ring contracts or subcontract to become due to each, and	genuine and delivered llowing are names of ts for specific portion	I unconditionally and all parties who have s of said work or for
NAMES	WHAT FOR	CONTRACT PRICE	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
Hein Construction Co., Ir	c. labor & material	\$ 120,957.00	\$ 0.00	\$ 75,024.00	\$ 45,933.00
the state of the s	1		:		Size Control of the C
Terrent control of the control of th	A MANUAL PROPERTY AND ADMINISTRATION OF THE PROPERT	· ,			
Westernament of the state of th	<u>-</u>	•		-	
			there is nothing due or to ion with said work other tha		erson for material,
Signed this 1st	day of Ma	<b>y</b> ************************************	, 20 25		
de an material trajung sin shi la la	, situation and adopting the second	Signature	X Land	-/ Whi	The color of the state of the s
Subscribed and affirme	ed to before me this	<i>  Sk</i> da	y of WA		,20 25
Processor: JODI			U(16	Notany Bublic	
			Notari Buhila Ca	Notary Public	)
			Notary Public, Sta Official S Christy Mc	Seal	
•			Commission # 2 My Commission Ex	243235	