	Pursuant to the Federal Phisory Act (P.L. 99-579) and the Information Practices Act of 1977 (GAVI Code Sections 1788, et seq.), notice is hereby given for the request of personal information victorial formation in Practices and the formation may dealy processing of this form. The equested information may dealy processing of this form. Not discuss une of personal information will be made unless premissible under Article 6, Section 1798, 24 of the PA of 1977. Equipility florametric may be an original personal information in any record martained on the individual by an identifying particular. Direct any inquiries on information maintainments to your PA Officer.			NET AGES CK. PAID NO. FOR																			
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	For information call (916) MS-89, Sacramento, CA	ORESS		Ь	St T	0	ဟ	0	တ	0	S	0	တ	0	S	0	ဟ	0	ဟ	0	S	0	S
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TATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION CONTRACTOR PAYROLL SUBCONTRACTOR PAYROLL	y disabi		i PROJECT AND LOCATION	FMPIOVEF	NAME, ADDRESS AND SOCIAL SECURITY NUMBER																		
TATE OF CALIFORNIA DEPAR	EM-2502 (REV 4/2001) EM-2502 (REV 4/2001) ADA Notice	ONTRACTOR/SUBCONTRACTOR	AYROLL NO. FOR WEEK ENDING		NAME, ADDRESS																		



STATE OF CALIFORNIA \cdot DEPARTMENT OF TRANSPORTATION **STATEMENT OF COMPLIANCE**

C

CEM-2503 (REV 8/96)								
CONTRACTOR/SUBCONTRACTOR	CONTRACT NUMBER							
FIRST DAY AND DATE OF PAY PERIOD	LAST DAY AND DATE OF PAY PERIOD							
I do hereby certify under penalty of perjury:								
persons employed on said project for the above-referenced ti- rebates have been or will be made either directly or indirectly	e-referenced contractor on the above-referenced contract. All me period have been paid their full weekly wages earned, that no ly to or on behalf of said contractor from the full weekly wages de either directly or indirectly from the full wages earned by any							
wage rates for laborers or mechanics contained therein are not (a) Specified in the applicable wage determination in	acorporated into the contract; ns for the county or counties in which the work is performed;							
(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency.								
except as noted below. (b) Have been paid directly to the listed employee(s).	Have been or will be paid to the approved plan(s), fund(s), or program(s) for the benefit of listed employee(s), except as noted below. Have been paid directly to the listed employee(s), except as noted below.							
(c) ☐ See exceptions noted below.								
EXCEPTION CRAFT	EXPLANATION							
REMARKS:								
NAME (PLEASE PRINT.)	TITLE							
SIGNATURE [DATE							
On federally-funded projects, permissible deductions are defined in Re Labor under the Copland Act, as amended (48 Sat. 948 63 Stat. 108,72 Stat								
Also the willful falsification of any of the above statements may subject th								

Section 1001 of Title 18 and Section 231 of Title 31 of the United States Code).

ADA Notice For individuals with sensory disabilities, this document is available in alternate formats. For information call (916) 263-2041 or TDD (916) 263-2044 or write Records and Forms Management, 1120 N Street, MS-89, Sacramento, CA 95814.

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Sample Forms A-1.33