

6-21-25



Page _____ of _____

[illegible]

Form A-1-131 (New 2-80)

S = STRAIGHT TIME
O = OVERTIME
SDI = STATE DISABILITY INSURANCE

*OTHER - Any other deductions, contributions and/or payments whether or not included or required by prevailing wage determinations must be separately listed. Use extra sheet(s) if necessary

CERTIFICATION MUST be completed
(See reverse side)

SECURITY FEATURES INCLUDE TRUE WATERMARK PAPER, HEAT SENSITIVE ICON AND FOIL HOLOGRAM

WES REECE CRANE SERVICE INC.

01-24

5809 DANBURY CT WK. 661-587-7193
BAKERSFIELD, CA 93312

1713

90-3702/1211

DATE 6-20-25

CHECK NUMBER

PAY
TO THE
ORDER OF

marcus Fidel

\$ 1220³⁸

Twelve hundred twenty 38

DOLLARS



BANK OF THE SIERRA.
KEEP GLIMMING
BankoftheSierra.com | 1888.454.BANK



FOR

1 PCW McKinley

Lawrence

⑈001713⑈ ⑆121137027⑆

0902344668⑈

Public Works Certified Payroll Reporting Form

Certification under penalty of perjury:

"I, Laura Reece , the undersigned, have the authority to act for and on behalf of BILL WESLEY REECE , certify under penalty of perjury that the records or copies thereof submitted and consisting of certified payroll records for the dates 2025-06-15 to 2025-06-21 are the originals or true, full, and correct copies of the originals which depict the payroll record(s) of the actual disbursements by way of cash, check, or whatever form to the individual or individuals named."

Contractor Name: BILL WESLEY REECE															Contractor License CSLB PWCR: 1000005784 Type: License Number:									
Address: 5609 DANBURY COURT, BAKERSFIELD, CA 93312																								
Insurance Number: 9133534-18																								
Awarding Body: BAKERSFIELD CITY SCHOOL DISTRICT 1										DIR Project ID: 112745					Project Name: McKinley Elementary School									
Contract With: JOURNEY AIR CONDITIONING CO., INC.										County:					Address: 601 FOURTH ST., BAKERSFIELD, CA 93304									
Payroll #: PRRUN2457158					Ctr Payroll #: ACCT0025846					Week Ending: 2025-06-21					☐ Statement of Non-Performance?					☐ Final payroll for this project?				
Employee: FIDEL, MARCUS																								
Type	Craft/Classification/Level	Sun 06/15	Mon 06/16	Tue 06/17	Wed 06/18	Thu 06/19	Fri 06/20	Sat 06/21	Total Hours	Base Hourly	Vac. Holi.	H&W	Pension	Other	Training	Fund/ Admin	Savings	Dues	Total Fringe	Total Hourly Rate				
S	CRANES, PILE DRIVER AND HOISTING EQUIPMENT (OPERATING ENGINEER) : OTHER (PLEASE SPECIFY) -	0.00	0.00	0.00	0.00	1.00	0.00	0.00	1.00	61.58	3.95	13.20	15.65	0.43	0.00	0.00	0.00	0.00	33.23	94.81				

Public Works Certified Payroll Reporting Form

Group 8 Oper eng - JOURNEYMAN CRANES, PILE DRIVER AND HOISTING EQUIPMENT O (OPERATING ENGINEER) : 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00											
OTHER (PLEASE SPECIFY) - Group 8 Oper eng - JOURNEYMAN CRANES, PILE DRIVER AND HOISTING EQUIPMENT D (OPERATING ENGINEER) : 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00											
OTHER (PLEASE SPECIFY) - Group 8 Oper eng - JOURNEYMAN											

Deductions (per payroll): Federal Tax: 0.00 FICA (Soc. Sec.): 7.25 State Tax: 0.00 SDI: 1.04 Total Deductions (incl. Other): 8.29	Payments: Travel & Subsistence: 0.00	Wages Summary: Gross wages for all projects included in this check: 94.81 Gross Wages for this project: 94.81 Net Wages for all projects: 86.52	Employee Notes (Include other deductions, contributions, and/or payments):
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🔔 NOTIFICATION PAUSING ENFORCEMENT OF PW SYSTEM REQUIREMENTS - 1771.4(a)(3)

This is to notify interested parties that enforcement of contractor registration requirements as well as the requirement to submit electronic certified payroll records (eCPRs) to the Labor Commissioner using DIR's online eCPR system is temporarily paused for the period of 12 months, which runs from 6/22/2024 through 6/22/2025. Awarding agencies will not be penalized for hiring unregistered contractors nor need to withhold funds due to a contractor's inability to register nor provide eCPRs due to system issues. Additionally, Awarding Bodies and Prime Contractors should not prevent contractors from bidding or working on a Public Works job as a result of their inability to register or submit certified payroll due to system issues. Once the stay of enforcement is lifted, contractors will not be required to retroactively submit eCPRs nor will they be required to retroactively register. It is important to note that the requirement to submit eCPRs is separate and distinct from the obligation in Labor Code section 1776 which is unaffected by this notice. The Labor Commissioner recommends that awarding bodies and general contractors consider this announcement in the administration of their public works projects. Specifically, where eCPRs may be unavailable during this time, awarding bodies and general contractors should rely on certified payroll records (on forms such as the DIR Form A-1-131) maintained as required by Labor Code section 1776 to ensure continued compliance with all other public works requirements.

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BILL WESLEY REECE projects > 112745 > eCPRs > eCPR 6/15/2025 to 6/21/2025

eCPR 6/15/2025 to 6/21/2025

Submitted

Payroll ID PRRUN2457158

[Export as PDF](#)[Save](#)

Payroll Setup

Completed



Employee Selection

Completed



Payroll Information

Completed



Review and Submit

Completed



Review eCPR



Sign and Submit eCPR

Sign and Submit eCPR

Project
112745

I, Laura Reece, the undersigned, have the authority to act for and on behalf of BILL WESLEY REECE, certify under penalty of perjury that the records or copies thereof submitted and consisting of certified payroll records for the dates 06/15/2025 to 06/21/2025 are the originals or true, full, and correct copies of the originals which depict the payroll record(s) of the actual

disbursements by way of cash, check, or whatever form to the individual or individuals named.

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SECURITY FEATURES INCLUDE TRUE WATERMARK PAPER, HEAT SENSITIVE ICON AND FOIL HOLOGRAM

WES REECE CRANE SERVICE INC. 01-24
5609 DANBURY CT WK. 661-587-7193
BAKERSFIELD, CA 93312

1715

90-3702/1211

DATE 6-22-25

CHECK

PAY
TO THE
ORDER OF

Noah Blake

\$ 1322⁵³

Thirteen hundred twenty two⁵³

DOLLARS

 **BANK of SIERRA.**
KEEP ORIGINALS
BankoftheSierra.com | 1888.454.BANK



FOR

PW 2 McKinley 3 Roosevelt
2 Washington

Jan Rice

⑈001715⑈ ⑆121137027⑆

0902344668⑈

2 McKinley

Public Works Certified Payroll Reporting Form

Certification under penalty of perjury:

"I, Laura Reece, the undersigned, have the authority to act for and on behalf of BILL WESLEY REECE, certify under penalty of perjury that the records or copies thereof submitted and consisting of certified payroll records for the dates 2025-06-15 to 2025-06-21 are the originals or true, full, and correct copies of the originals which depict the payroll record(s) of the actual disbursements by way of cash, check, or whatever form to the individual or individuals named."

Contractor Name: BILL WESLEY REECE															Contractor PWCR: 1000005784 License Type: License Number: CSLB									
Address: 5609 DANBURY COURT, BAKERSFIELD, CA 93312																								
Insurance Number: 9133534-18																								
Awarding Body: BAKERSFIELD CITY SCHOOL DISTRICT 1										DIR Project ID: 112745					Project Name: McKinley Elementary School									
Contract With: JOURNEY AIR CONDITIONING CO., INC.										County:					Address: 601 FOURTH ST., BAKERSFIELD, CA 93304									
Payroll #: PRRUN2457190					Ctr Payroll #: ACCT0025846					Week Ending: 2025-06-21					☐ Statement of Non-Performance?					☐ Final payroll for this project?				
Employee: BLAKE, NOAH																								
Type	Craft/Classification/Level	Sun 06/15	Mon 06/16	Tue 06/17	Wed 06/18	Thu 06/19	Fri 06/20	Sat 06/21	Total Hours	Base Hourly	Vac. Holi.	H&W	Pension	Other	Training	Fund/ Admin	Savings	Dues	Total Fringe	Total Hourly Rate				
S	CRANES, PILE DRIVER AND HOISTING EQUIPMENT (OPERATING ENGINEER) : OTHER (PLEASE SPECIFY) -	0.00	0.00	0.00	2.00	0.00	0.00	0.00	2.00	61.58	3.95	13.20	15.65	0.43	0.00	0.00	0.00	0.00	33.23	94.81				

Public Works Certified Payroll Reporting Form

Group 8 Oper eng - JOURNEYMAN										
CRANES, PILE DRIVER AND										
HOISTING EQUIPMENT										
O	(OPERATING ENGINEER) :	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OTHER (PLEASE SPECIFY) -										
Group 8 Oper eng - JOURNEYMAN										
CRANES, PILE DRIVER AND										
HOISTING EQUIPMENT										
D	(OPERATING ENGINEER) :	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OTHER (PLEASE SPECIFY) -										
Group 8 Oper eng - JOURNEYMAN										

Deductions (per payroll):

Federal Tax: 0.00
 FICA (Soc. Sec.): 14.51
 State Tax: 0.00
 SDI: 2.28
 Total Deductions (incl. Other): 16.79

Payments:

Travel & Subsistence: 0.00

Wages Summary:

Gross wages for all projects included in this check: 189.62
 Gross Wages for this project: 189.62
 Net Wages for all projects: 172.83

Employee Notes (Include other deductions, contributions, and/or payments):

🔔 NOTIFICATION PAUSING ENFORCEMENT OF PW SYSTEM REQUIREMENTS - 1771.4(a)(3)



This is to notify interested parties that enforcement of contractor registration requirements as well as the requirement to submit electronic certified payroll records (eCPRs) to the Labor Commissioner using DIR's online eCPR system is temporarily paused for the period of 12 months, which runs from 6/22/2024 through 6/22/2025. Awarding Agencies will not be penalized for hiring unregistered contractors nor need to withhold funds due to a contractors inability to register nor provide eCPRs due to system issues. Additionally, Awarding Bodies and Prime Contractors should not prevent contractors from bidding or working on a Public Works jobs as a result of their inability to register or submit certified payroll due to system issues. Once the stay of enforcement is lifted, contractors will not be required to retroactively submit eCPRs nor will they be required to retroactively register. It is important to note that the requirement to submit eCPRs is separate and distinct from the obligation in Labor Code section 1776 which is unaffected by this notice. The Labor Commissioner recommends that awarding bodies and general contractors consider this announcement in the administration of their public works projects. Specifically, where eCPRs may be unavailable during this time, awarding bodies and general contractors should rely on certified payroll records (on forms such as the DIR Form A-1-131) maintained as required by Labor Code section 1776 to ensure continued compliance with all other public works requirements.

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BILL WESLEY REECE projects > 112745 > eCPRs > eCPR 6/15/2025 to 6/21/2025

eCPR 6/15/2025 to 6/21/2025

Submitted

Payroll ID PRRUN2457190

[Export as PDF](#)[Save](#)

- ✓ Payroll Setup
Completed
- ✓ Employee Selection
Completed
- ✓ Payroll Information
Completed
- ✓ Review and Submit
Completed
- Review eCPR
- Sign and Submit eCPR

Sign and Submit eCPR

Project
112745

I, Laura Reece, the undersigned, have the authority to act for and on behalf of BILL WESLEY REEC, certify under penalty of perjury that the records or copies thereof submitted and consisting of certified payroll records for the dates 06/15/2025 to 06/21/2025 are the originals or true, full, and correct copies of the originals which depict the payroll record(s) of the actual disbursements by way of cash, check, or whatever form to the individual or individuals named.

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Statement of Compliance

Date: 6-21-25

Payroll Number: 1

Contract Number: _____

I, Laura Reece Director, under penalty of perjury, do hereby state:
(Name of Signatory Party) (Title)

(1) That I pay or supervise the payment of the persons employed by Was Reece Crane Ser Inc on the McKinley Elementary Public Works Project, that during the payroll period commencing 6-15-25 and ending 6-21-25, 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 the above named construction firm/contractor/individual from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in the California Labor Code, Division 2, Part 7, Chapter 1 (Public Works Sections 1720 through 1861) and/or described below:

(2) That the payrolls, under this Public Works Project, required to be submitted for the above period are true, correct and complete; that the wage rates for laborers and mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with the state apprenticeship agency and that training contributions are/will be made pursuant to California Labor Code Section 1777.5

(4) That:

(a) **WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS OR PROGRAM**

☐ In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have or will be made to the appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) **WHERE FRINGE BENEFITS ARE PAID IN CASH**

☒ Each laborer or mechanic listed in the above referenced payroll has been paid as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below:

(c) **EXCEPTIONS**

REMARKS

NAME AND TITLE <u>Laura Reece Director</u>	SIGNATURE <u>Laura Reece</u>
---	---------------------------------

The willful falsification of any of the above statements may subject the Firm/Contractor/Subcontractor/Individual to civil or criminal prosecution under California Laws.



**TRAINING FUND
CONTRIBUTIONS**

*California Apprenticeship
Council*

Transaction ID: 2066371
Total Amount: \$3.30

Please Mail this form and your check payable to the
California Apprenticeship Council to:

Contractor License: 545978

State of California
Department of Industrial Relations
California Apprenticeship Council
P.O. Box 511283
Los Angeles, CA 90051-7838

Contractor's Name & Address:
Bill Reece
5609 DANBURY CT
BAKERSFIELD, CA 93312

Report Period: 6/15/2025 to 6/21/2025
Contract/Project No: 112745
Jobsite: McKinley Elementary School

Remittance for the Following Projects

<u>COUNTY</u>	<u>CLASSIFICATION</u>	<u>HOURS</u>	<u>CONTRIBUTION RATE</u>	<u>AMOUNT</u>
KERN	OPERATING ENG	3.00	\$1.10	\$3.30

Submitter Contact Information

<u>Submitter's name</u>	<u>Submitter's title</u>	<u>Email address</u>	<u>Phone #</u>
Laura Vee Reece	Director	laurareece58@gmail.com	6612037220

Generated: 6/22/2025

WES REECE CRANE SERVICE INC. 01-24
5609 DANBURY CT WK. 661-557-7193
BAKERSFIELD, CA 93312

1714

90-5702/1211

DATE 6-22-25

CHECK #

PAY
TO THE
ORDER OF

Caly App Council
Three dollar⁹³

\$ 3³⁰

DOLLARS

 **BANK & SIERRA.**
KEEP CLIMBING
BankoftheSierra.com | 1888.454.BANK



FOR

MCKMUR (3)

Lawless

⑈001714⑈ ⑈121137027⑈

0902344668⑈

Kern County Superintendent of Schools
Labor Compliance Program
Contractor Fringe Benefit Statement

Project Name: <u>McKinley Ele. School</u>	Bid Package Or Sub To:	Today's Date: <u>6-17-25</u>
Contractor / Subcontractor: <u>Wes Reed Crane Ser</u>	Business Address: <u>3609 Danbury Ct</u>	
Contractor's License No.: <u>545978</u>	Phone: <u>461-203-7220</u>	Fax: <u>Bakersfield, CA 93312</u>

In order that the proper Prevailing Wage Rates can be verified when checking payrolls on the above project, the **hourly rates** for fringe benefits, subsistence and/or travel allowance payments to employees, of the various classes of work, are to be tabulated below.

Classification: <u>Op Eng</u>	Bid Advertisement Date:	Subsistence or Travel: Required: Y ☐ N ☒
Determination:	\$	
Group/Period: <u>Group</u>	Increase Date(s): <u>July 1st</u>	
Office Use Only		
Base Rate: \$ <u>61.58</u>	Indicate where fringes and training are paid.	
Indicate "cash to employee" when fringes are paid to the employee in their wages.		
Employer Payments	Health & Welfare \$ <u>13.20</u>	Paid To: Name: <u>Marcus Fidel</u> Address: <u>9323 Seabreeze Ave</u>
	Pension \$ <u>15.65</u>	Paid To: Name: <u>Bakersfield, CA 93312</u> Address: <u>Marcus Fidel</u>
	Vacation/Holiday \$ <u>3.90</u>	Paid To: Name: <u>Marcus Fidel</u> Address: <u>Marcus Fidel</u>
	Other \$ <u>.43</u>	Paid To: Name: <u>Marcus Fidel</u> Address: <u>Marcus Fidel</u>
	Training \$ <u>1.10</u>	Paid To: Name: <u>Calif App Council</u> Address: <u>P.O. Box 511283</u>
	Hourly Rate: <u>95.91 - 1.10</u>	<u>9481 Los Angeles CA 90051</u>

Classification:	Bid Advertisement Date:	Subsistence or Travel: Required: Y ☐ N ☐
Determination:	\$	
Group/Period:	Increase Date(s):	
Office Use Only		
Base Rate: \$	Indicate where fringes and training are paid.	
Indicate "cash to employee" when fringes are paid to the employee in their wages.		
Employer Payments	Health & Welfare \$	Paid To: Name: _____ Address: _____
	Pension \$	Paid To: Name: _____ Address: _____
	Vacation/Holiday \$	Paid To: Name: _____ Address: _____
	Other \$	Paid To: Name: _____ Address: _____
	Training \$	Paid To: Name: _____ Address: _____
	Total Rate:	

Revised fringe benefit statements must be submitted during the progress of work if a change in any rate of pay for any work classification is made.

Submitted By: (Please Print) <u>Laura Reed</u>	Title / Position:
Signature: <u>Laura Reed</u>	<u>Director</u>

Kern County Superintendent of Schools
Labor Compliance Program

Contractor Fringe Benefit Statement

Project Name: <u>McKinley Ele. School</u>		Bid Package Or Sub To:	Today's Date: <u>6-17-25</u>
Contractor / Subcontractor: <u>Wes Reed Crane Ser</u>		Business Address: <u>3609 Danbury Ct Bakersfield, CA 93312</u>	
Contractor's License No.: <u>545978</u>	Phone: <u>661-203-7220</u>	Fax:	

In order that the proper Prevailing Wage Rates can be verified when checking payrolls on the above project, the **hourly rates** for fringe benefits, subsistence and/or travel allowance payments to employees, of the various classes of work, are to be tabulated below.

Classification: <u>Op Eng</u>		Bid Advertisement Date:		Subsistence or Travel:	
Determination:				Required: Y ☐ N ☒	
Group/Period: <u>Group</u>		Increase Date(s): <u>July 1st</u>		\$	
		Office Use Only		Indicate where fringes and training are paid.	
Base Rate: \$ <u>61.58</u>				Indicate "cash to employee" when fringes are paid to the employee in their wages.	
Employer Payments	Health & Welfare \$ <u>13.20</u>			Paid To: Name: <u>Noah Blake</u>	Address: <u>10703 Montemar Dr Bakersfield CA 93311</u>
	Pension \$ <u>15.65</u>			Paid To: Name: <u>Noah Blake</u>	
	Vacation/Holiday \$ <u>3.90</u>			Paid To: Name: <u>Noah Blake</u>	
	Other \$ <u>.43</u>			Paid To: Name: <u>Noah Blake</u>	
	Training \$ <u>1.10</u>			Paid To: Name: <u>Calif App Council</u>	
	Hourly Rate: <u>95.91 - 1.10</u>			Address: <u>P.O. Box 51283 Los Angeles CA 90051</u>	

Classification:		Bid Advertisement Date:		Subsistence or Travel:	
Determination:				Required: Y ☐ N ☐	
Group/Period:		Increase Date(s):		\$	
		Office Use Only		Indicate where fringes and training are paid.	
Base Rate: \$				Indicate "cash to employee" when fringes are paid to the employee in their wages.	
Employer Payments	Health & Welfare \$			Paid To: Name:	Address:
	Pension \$			Paid To: Name:	
	Vacation/Holiday \$			Paid To: Name:	
	Other \$			Paid To: Name:	
	Training \$			Paid To: Name:	
	Total Rate:			Address:	

Revised fringe benefit statements must be submitted during the progress of work if a change in any rate of pay for any work classification is made.

Submitted By: (Please Print) <u>Laura Reed</u>	Title / Position: <u>Director</u>
Signature: <u>Laura Reed</u>	