State of South Carolina Contribution Expenditure Report

This form is designed to collect the quarterly and annual expenditure reports required by South Carolina in accordance with Proviso 117.21 of the appropriations act and Executive Order 2022-19. This form must be submitted to the state agency that is providing the contribution to the designation organization at the end of year quarter and by June 30, 2024.

		Contribution Information
Amount	State Agency Providing the Contribution	Purpose
\$12,000,000.00	U300 -Aeronautics Division	September 30, 2024 Quarterly Disbursement Report - SCAC 23-029

	Organization Information
Entity Name	Hilon Head Island Airport
Address	120 Beach City Road
City/State/Zip	Hilton Head Island, SC 29926
Website	www.hiltonheadairport.com
Tax ID#	57-6000311
Entity Type	County

	Organization Contact Information
Name	Jon Rembold
Position/Title	Airports Director
Telephone	843-441-5871
Email	jrembold@bcgov.net

	Reporting Period
Reporting Period	Quarter Ending September 30, 2024

Printed Name

Accounting of how the funds have been spent:									
Description			Ехре	nditures					
(Attach additional detail for subgrantees and affiliated nonprofits)	Budget	Quarter 1 ending 09/30/2024	Quarter 2 ending 12/31/2024	Quarter 3 Ending 03/31/2025	Quarter 4	Total	Balance		
HXD Terminal Expansion Project Phase 1	\$12,000,000.00	\$1,453,704.55				\$1,453,704.55	\$10,546,295.45		
						\$0.00	\$0.00		
						\$0.00	\$0.00		
						\$0.00	\$0.00		
						\$0.00	\$0.00		
						\$0.00	\$0.00		
						\$0.00	\$0.00		
						\$0.00	\$0.00		
						\$0.00	\$0.00		
Grand Total	\$12,000,000.00	\$1,453,704.55				\$1,453,704.55	\$10,546,295.45		

Explanation of any unspent funds (to be provided only if unspent funds remain at the end of the fisc
--

	Expenditure Certification
The Organization certifies that the funds have be	expended in accordance with the Plan provided to the Agency Providing the Distribution and for a public purpose.
0.100.04	Airports Director
Signature	Title
Jon Rembold	09/30/2024

Date

*******REQUEST FOR REIMBURSEMENT ******* SOUTH CAROLINA AERONAUTICS COMMISSION # 1

AIRPORT NAME: Hilton Head Island Airport
SCAC NO: 23-029 DATE 06/28/2024
PROJECT DESC: Terminal Expansion
AIP NUMBER: 3-45-0030-045-2020 AIP AMOUNT:\$ 10,000,000
OTHER FUNDS:\$ 0.00 SCAC GRANT AMOUNT:\$ 12,000,000
PERCENT COMPLETED: 3 %
AMOUNT BILLED TO SPONSOR TO DATE: \$1,505,626.11_
AMOUNT PAID BY SPONSOR TO DATE: \$\\ _1.505,626.11
AMOUNT BILLED TO STATE BY DATE: \$\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
AMOUNT PAID BY STATE TO DATE: \$ 0.00
PAYMENT REQUESTED THIS APPLICATION: \$ 163,967.65
This is to certify that the required local funds, a minimum of \$163,967.65 were on hand and have been encumbered for the purpose of matching funds allocated by the SC Aeronautics Commission for this project; and no other state funds will be used to match Aeronautics funds specifically appropriated to the sponsor for this project: and that the city, county, or authority has paid \$1,505,626.11 on the above project. (Include copies of all invoices,

Signature & Title of County, City, or Authority Representative

charges. cancelled checks, or bank statements)

the contract documents to the South Carolina Aeronautics Commission. This is to certify that all materials have been received and/or all work was performed as specified in

Airports Director

APPROVED FOR PAYMENT: July 5, 2024 AUDIT BY: Chris Eversmann FOR AERONAUTICS USE ONLY Signature & Title TOTAL PAID **AMT OF GRANT** \$ 5 12,000,000.00

RFR-1 still under review / Project is ongoing / please keep grant open

ACCOUNT ID. NO:

THIS REQUEST

S

AMT REMAINING \$

11,836,032.35

163,967.65

Date: 06/27/2024 Airport: HILTON HEAD ISLAND AIRPORT

SCDOA NO: 23-029 Payment Request No. 2

		,								
								AIP SHARE (See		
						INVOICE	Application of	AIP Share		
			CHECK/EFT			AMOUNT (See	FAA 86.19%	Summary Below		
PAYEE	DATE PAID	EFT#	AMOUNT	INVOICE NO.	INVOICE DATE	Summary Below)	Eligibility Ratio	86.1	SCAC	FULL DESC
Previously requested										
EDISON FOARD LLC	2/29/2024	25211	\$ 774,639.65	4-2119-1905	1/30/2024	\$ 774,639.65	\$ 667,644.60	\$ 600,880.14	173,759.51	HXD TERMINAL EXPANSION PROJECT PHASE 1
Requested this pay re	equest									
EDISON FOARD LLC	3/27/2024	25974	\$ 730,986.46	5-2119-1905	2/29/2024	\$ 730,986.46	\$ 630,020.90	\$ 567,018.81	163,967.65	HXD TERMINAL EXPANSION PROJECT PHASE 1
Total of all past and o	current pay req	uests				\$ 1,505,626.11			337,727.16	

PAGE: 1 OF 1

EFT NUMBER: 00025974

	\$730,986.46	GL#:10001130 - 57130		
\$730,986.46		HXD TERMINAL EXPANSION PROJECT PHASE 1	PAY APP#5	02/29/2024
INVOICE AMOUNT		DESCRIPTION	INVOICE NUMBER	INVOICE DATE

VENDOR NUMBER	VENDOR NAME	EFT NUMBER	EFT DATE	EFT AMOUNT
16268	EDISON FOARD LLC	25974	03/27/2024	\$730,986.46



Beaufort County Finance

Vendor Number 16268

EFT Number

25974

EFT Date 03/27/2024

Post Office Drawer 1228
Beaufort, South Carolina 29901-1228
(843) 255-2290

\$730,986.46

Pay *Seven Hundred Thirty Thousand Nine Hundred Eighty-six Dollars and 46 Cents*

To the EDISON FOARD LLC Order Of PO BOX 19888 CHARLOTTE, NC 28219-0888

NON-NEGOTIABLE



Beaufort County Finance
Post Office Drawer 1228
Beaufort, South Carolina 29901-1228
(843) 255-2290

ADDRESS SERVICE REQUESTED

EDISON FOARD LLC PO BOX 19888 CHARLOTTE, NC 28219-0888

The Wilson Group Project No.: 9221-000

Hilton Head Island Airport (HXD) Terminal Improvements - Phase 1 February 15, 2023

20240699

ESTIMATE FOR PARTIAL PAYMENT

i	No:	
	ΩI	

\$30,898,447.83 \$2,792,908.90 \$279,290.89 \$2,513,618.01 \$1,782,631.55 \$730,986.46 \$730,986.46	Current Contract Price: Total Amount Earned (Col. 9): Retained Percentage (10 %): Total Earned Less Retained: Total Previously Approved: Amount Due This Estimate: Total Amount Due:
\$30,898,447.83 \$0.00	Original Contract Price: Net Change Orders:
Contract Date: September 13, 2023 For Period Ending: February 29, 2024	Contractor: Edison Foard, LLC Contract For: General Contractor - Terminal Imp. Ph. Application Date: February 25, 2024
TBI Project No.: 2119-1905	Owner's Project No.: IFB #041923 Project Name: TERMINAL IMPROVEMENTS-Phase 1

CERTIFICATE OF CONTRACTOR

changes thereto; that the above is a true and correct statement of the contract up to and including the last day of the period of the estimate; that all that all work has been performed and materials supplied in accordance with the terms and conditions of the Construction Contract and all authorized incorporated in the above project are free and clear of all liens, security interests and encumbrances. previous payments received from the Owner for work performed under the Construction Contract have been applied to discharge all obligations The undersigned certifies to the best of his knowledge and belief that all items, units, quantities and prices for work and material herein are correct; incurred by the undersigned in connection with work covered by prior estimates for partial payment; and that all materials and equipment Title: Project Manager

Ву:_ Contractor: Nicholas Roberts Date: March 6, 2024

CERTIFICATE OF OWNER'S ENGINEERS

I certify that I have verified this Estimate for Partial Payment and that to the best of my knowledge and belief it is a true and correct statement of work performed materials supplied under the Contract.

Name: Resident Observer Thomas A Mullen TALBERT, BRIGHT & Ellington, INC., COLUMBIA, SOUTH CAROLINA 3/11/2024 **Project Engineer** Name: 03-15-24

BY: Jon Rembold	OWNER'S RECOMME! Approved and Payment Recommended:
TITLE: Airport Director DATE: 3/19/2024	OWNER'S RECOMMENDATION FOR PAYMENT
	, OWNER

Forms C-1 PROJECT:

Application and Certificate for Payment

Hilton Head Island Airport

TO OWNER:

	PO Drawer 1228 Beaufort, SC 29901		120 Beach City Ro Hilton Head Island		PERIOD TO: February 29, 2024 CONTRACT FOR: General Const	
FROM	Edison Foard, LLC	VIA	The Wilson Group A	Architects	CONTRACT DATE: September 13	
CONTRACTOR:	PO Box 19888	ARCHITECT:	PO Box 5510	•	PROJECT NOS: /23-2932	
	Charlotte, NC 28219		Charlotte, NC 2829	9		FIELD:
						OTHER:
CONTRACT	ODIC ADDI ICATION FOR	DAVMENT			0	
	OR'S APPLICATION FOR			The undersigned information and h	Contractor certifies that to the	best of the Contractor's knowledge, s Application for Payment has been
Application is ma AIA Document G	de for payment, as shown below, in co 703®, Continuation Sheet, is attached.	onnection with the Con	ntract.	completed in accor	rdance with the Contract Docum	nents, that all amounts have been paid rtificates for Payment were issued and
1. ORIGINAL CON	TRACT SUM	••••••••••	\$30,898,447.83	payments received	from the Owner, and that curren	t payment shown herein is now due.
2. NET CHANGE B	Y CHANGE ORDERS	•••••••••	\$0.00	CONTRACTOR:	DIF	
3. CONTRACT SUI	M TO DATE (Line 1 ± 2)		\$30,898,447.83	By: Markety	1 Kolon	Date: March 06, 2024
4. TOTAL COMPLE	ETED & STORED TO DATE (Column G	on G703)	\$2,792,908.90	State of: North Carol	lina	LISAR. WILBANKS
5. RETAINAGE:				County of: Mecklen	burg	NOTARY PUBLIC
	of Completed Work			Subscribed and swor		Macklenburg County
•	+ E on G703)	\$279	290.89	me this 6th da	y of march, 2024	
(Column F	f Stored Material		\$0.00	Notama Darblina Al	201 B 41/1/10 20	Y Commission Expires June 28, 2026
`	,	. 6.0702)		My Commission exp	ires: June 28, 2026	
l otal Ketainag	e (Lines 5a + 5b or Total in Column I	of G/03)				
6. TOTAL EARNED	LESS RETAINAGE	•••••	\$2,513,618.01	ARCHITECT'S	CERTIFICATE FOR PAY	MENT
	s Line 5 Total)				the Contract Documents, based	d on on-site observations and the data
	S CERTIFICATES FOR PAYMENT		\$1,782,631.55			to the Owner that to the best of the Work has progressed as indicated, the
(Line 6 from	n prior Certificate)			quality of the Wor	k is in accordance with the Cont	ract Documents, and the Contractor is
CUDDENT DAVE	MENT DUE		\$730,986.46		t of the AMOUNT CERTIFIED.	
	INISH, INCLUDING RETAINAGE		\$730,980.40	AMOUNT CERTIFIED		0700 000 40
(Line 3 less	,	\$28,384,	920 92	(Attach explanation i	if amount cartified differs from the a	mount applied. Initial all figures on this
(Line 3 less	Line o)	<u>\$20,304,</u>	029.02	Application and on the	he Continuation Sheet that are chang	ged to conform with the amount certified.)
CHANGE ORDE	R SUMMARY	ADDITIONS	DEDUCTIONS	ARCHITECT:		
	proved in previous months by Owner	\$0.00	\$0.00	-		Date:
Total approved th	is Month	\$0.00	\$0.00			
	TOTALS	\$0.00	\$0.00	named herein. Issuan	ot negotiable. The AMOUNT CER'	TIFIED is payable only to the Contractor nent are without prejudice to any rights of
NET CHANGES	by Change Order		\$0.00	the Owner or Contract	ctor under this Contract.	none are minious projuntee to any rights of

HHIA Terminal Improvements - Phase 1 APRI ICATION NO. 005

Distribution to



Continuation Sheet

AIA Document G702®, Application and Certification for Payment, or G732TM, Application and Certificate for Payment, Construction Manager as Adviser Edition, containing Contractor's signed certification is attached.

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

APPLICATION NO:
APPLICATION DATE:
PERIOD TO:

005 February 25, 2024 February 29, 2024

ARCHITECT'S PROJECT NO:

23-2932 HHIA Terminal Improvements

Α	В	С	D	Е	F	G		H	I
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	WORK CO FROM PREVIOUS APPLICATION (D + E)	MPLETED THIS PERIOD	MATERIALS PRESENTLY STORED (NOT IN D OR E)	TOTAL COMPLETED AND STORED TO DATE (D + E + F)	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
001	Mobilization	355,962.60	88,991.00	0.00	0.00	88,991.00	25.00%	266,971.60	8,899.10
002	Contractor Quality Control Program	25,000.00	0.00	0.00	0.00		0.00%		
003	Construction Entrance	15,229.20	0.00	15,229.20			100.00%		
004	Silt Fence	12,672.00	8,534.40	0.00	0.00		67.35%		853.44
005	Tree Protection Fencing	45,761.20	37,090.14	0.00	0.00		81.05% 0.00%		
006	Concrete Washout	1,428.00	0.00		0.00		0.00%		
007 008	Seeding Rock Check Dams	8,452.50	0.00	0.00			0.00%		
008	Inlet Protection	3,458.70 5,926.20	0.00	0.00	0.00		0.00%	5,926.20	0.00
010	Temporary Fence - Bioretention Swale Sediment Tubes	76,256.25 1,121.40	0.00	0.00	0.00	0.00	0.00%		0.00
	1.5" Thick Asphalt Milling Asphalt Removal	29,865.60 64,032.00	0.00	0.00	0.00	0.00	0.00%	29,865.60	
013	Asphalt Pavement Removal - Airside, Any Thickness	4,578.40	0.00	0.00	0.00		0.00%		0.00
015	Concrete Removal - Landside and Airside	48,266.40	0.00	48,226.40	0.00	48,226.40	99.92%	40.00	4,822.64
016 017	Concrete Pavement Removal - Airside, Any Thickness Remove Pipe Bollard	10,662.75 507.15	0.00	0.00 507.15	0.00 0.00	507.15	0.00% 100.00%	0.00	0.00 50.72
018	12-inch Diameter	70,052.25	0.00	0.00	0.00	0.00	0.00%	70,052.25	0.00

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User Notes:

Α	В	С	D	E	F	G		H	I
-			WORK CO	MPLETED	MATERIALS	TOTAL			
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	PRESENTLY STORED (NOT IN D OR E)	COMPLETED AND STORED TO DATE	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
	Scheduled 80 PVC Storm Drain - Airside								
019	Storm Drain Cleanout in Pavement and Grass Areas	6,860.70	0.00	0.00	0.00	0.00	0.00%	6,860.70	0.00
020	6-inch Diameter Schedule 80 PVC Storm Drain - Airside	9,243.00	0.00	0.00	0.00	0.00	0.00%	9,243.00	0.00
021	4-inch Diameter Schedule 80 PVC Storm Drain - Airside	3,082.00	0.00	0.00	0.00	0.00	0.00%	3,082.00	0.00
022	Storm Drainage Manhole	7,324.80					0.00%	<u> </u>	
023	Temporary SIDA Fence	92,373.75	38,792.25	0.00	0.00	38,792.25	41.99%	53,581.50	3,879.23
024	Temporary Construction Fence	25,830.00	24,150.00	9,072.00	0.00	33,222.00	128.62%	-7,392.00	3,322.20
	Temporary 24-foot Wide Manual Double Swing Gate	4,200.00	2,100.00	0.00	0.00	2,100.00	50.00%	2,100.00	210.00
	Remove Chain Link Fence, Any Height	2,142.00	2,184.00	0.00	0.00	2,184.00	101.96%	-42.00	218.40
	Remove Chain Link Sliding Gate and All Related Appurtenances, Any Size	1,575.00	1,575.00	0.00	0.00	1,575.00	100.00%	0.00	157.50
	New 8-Ft Chain Link Fence with 3 Strands Barbed Wire-Black Coated	15,356.25	0.00	0.00	0.00	0.00	0.00%	15,356.25	0.00
	Pavement Marking Removal - Airside - Any Color on Any Pavement	31,570.00	0.00	0.00	0.00	0.00	0.00%	31,570.00	0.00
	Pavement Marking -	4,112.50					0.00%		

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User Notes:

A	В	С	D	E	F	G		H	I
			WORK CO	MPLETED	MATERIALO	TOTAL			
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	MATERIALS PRESENTLY STORED (NOT IN D OR E)	TOTAL COMPLETED AND STORED TO DATE (D + E + F)	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
	Reflectorized White								
031	Pavement Marking - Non-Reflectorized White	7,752.00	0.00	0.00	0.00	0.00	0.00%	7,752.00	0.00
032	Pavement Marking - Reflectorized Yellow	6,985.60	0.00	0.00	0.00	0.00	0.00%	6,985.60	0.00
033	Pavement Marking - Non-Reflectorized Yello	361.20	0.00	0.00	0.00	0.00	0.00%	361.20	0.00
034	Pavement Marking - Reflectorized Red	6,960.00	0.00	0.00	0.00	0.00	0.00%	6,960.00	0.00
035	Pavement Marking - Non-Reflectorized Red	484.90	0.00	0.00	0.00	0.00	0.00%	484.90	0.00
036	Pavement Marking - Black	19,216.80	0.00	0.00	0.00	0.00	0.00%	19,216.80	0.00
	Waterline Demolition & Removal	10,242.80	0.00				0.00%		
038	Misc Demolition	23,679.60	0.00				0.00%		
039	Tree Removal	231,739.20	0.00				100.00%		
040	Conduit Removal	5,250.00	0.00	0.00	0.00	0.00	0.00%	5,250.00	0.00
041	Embankment in Place - Import Fill - Airside	66,805.00	0.00	0.00	0.00	0.00	0.00%	66,805.00	0.00
042	Unsuitable Excavation - Airside	17,400.00	0.00				0.00%		
043	Stripping Topsoil	58,815.90	0.00		0.00		106.47%		
	Cut to Fill - Landside	13,473.00	0.00				0.00%		
045	Import Fill Material	219,810.00	0.00	/		<u> </u>	32.12%	· · · · · · · · · · · · · · · · · · ·	
	Muck & Fill	66,286.00	0.00				0.00%		
	Fine Grading	181,428.00	0.00				0.00%		
048	Storm Drain Grate Inlet	23,868.60	0.00	0.00	0.00	0.00	0.00%	23,868.60	0.00
049	Storm Drain Bubbler Box	91,459.68	0.00	0.00	0.00	0.00	0.00%	91,459.68	0.00
050	Yard Inlet with Domed Grate	41,296.50	0.00	0.00	0.00	0.00	0.00%	41,296.50	0.00

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051	Rip Rap Over Filter Fabric	27,080.00	0.00	0.00	0.00	0.00	0.00%	27,080.00	0.00
052	15" RCP	15,228.18	0.00				0.00%		0.00
053	18" RCP	32,677.75	0.00	0.00			0.00%		0.00
054	Concrete Flumes	17,360.10	0.00				0.00%	17,360.10	0.00
055	12" Perforated Underdrain with Stone Trench Core Existing Outlet	55,033.24	0.00				0.00%		
056	Box for Underdrain Connection	4,060.35	0.00	0.00	0.00	0.00	0.00%	4,060.35	0.00
057	Roof Drainage Collection System	266,332.50	0.00	0.00	0.00	0.00	0.00%	266,332.50	0.00
058	Bioretention / Bioswale Soil Media Construction	125,703.50	0.00	0.00	0.00	0.00	0.00%	125,703.50	0.00
059	2" Asphalt Surface Course - Landside	227,640.00	0.00	0.00	0.00	0.00	0.00%	227,640.00	0.00
060	8" Aggregate Base Course - Landside	212,730.00	0.00	0.00	0.00	0.00	0.00%	212,730.00	0.00
061	Tack Coat - Landside	10,092.00	0.00	0.00	0.00	0.00	0.00%	10,092.00	0.00
062	Concrete Curb - Landside	66,845.70	0.00	0.00	0.00	0.00	0.00%	66,845.70	0.00
063	Concrete Pavers - Landside	108,023.10	0.00	0.00	0.00	0.00	0.00%	108,023.10	0.00
064	6" Thick Portland Cement Concrete Pavement	292,748.70	0.00	0.00	0.00	0.00	0.00%	292,748.70	0.00
065	6" Thick Portland Cement Concrete Pavement (Reinforced)	127,180.20	0.00	0.00	0.00	0.00	0.00%	127,180.20	0.00
066	8" Thick Portland Cement Concrete Pavement	30,968.30	0.00	0.00	0.00	0.00	0.00%	30,968.30	0.00

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			WORK CO	MPLETED	MATERIALS	TOTAL			
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	PRESENTLY STORED (NOT IN D OR E)	COMPLETED AND STORED TO DATE	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
	8" Thick Portland Cement Concrete								
067	Pavement (Reinforced)	8,195.50	0.00	0.00	0.00	0.00	0.00%	8,195.50	0.00
068	Bituminous Base Course	469,211.55	0.00	0.00	0.00	0.00	0.00%	469,211.55	0.00
069	Bituminous Tack	4,485.00	0.00	0.00	0.00	0.00	0.00%	4,485.00	0.00
	4" Concrete Sidewalk -								
070	Landside	77,523.38	0.00	0.00	0.00	0.00	0.00%	77,523.38	0.00
071	4" Concrete Sidewalk - Airside	11,522.50	0.00	0.00	0.00	0.00	0.00%	11,522.50	0.00
072	4" Concrete Pad for Bike Racks	3,472.00	0.00	0.00	0.00	0.00	0.00%	3,472.00	0.00
073	4" Oyster Shell Concrete Walkway	58,287.90	0.00	0.00	0.00	0,00	0.00%	58,287.90	0.00
074	Internally Pigmented Concrete Crosswalks	173,166.00	0.00	0.00	0.00	0.00	0.00%	173,166.00	0.00
075	Concrete Wheelstop	7,969.50	0.00	0.00	0.00	0.00	0.00%	7,969.50	0.00
076	Handicap Ramps with Detectable Warnings	28,933.54	0.00	0.00	0.00	0.00	0.00%	28,933.54	0.00
077	6" Concrete Dumpster Pad	19,674.95	0.00	0.00	0.00	0.00	0.00%	19,674.95	0.00
078	Wood Dumpster Enclosure	144.90	0.00	0.00	0.00	0.00	0.00%	144.90	0.00
079	Striping, Signage & Marking	22,641.15	0.00	0.00	0.00	0.00	0.00%	22,641.15	0.00
080	Tie-in to Existing Waterline	17,947.65	0.00	0.00		0.00	0.00%		0.00
081	10" PVC Water Line	56,838.40	0.00	0.00			0.00%	·	0.00
082	6" PVC Water Line	239.40	0.00	0.00			0.00%		0.00
083	6" PVC Fire Line	11,010.90	0.00	0.00			0.00%		
084	Free-Standing FDC	16,842.00		0.00			0.00%		
085	2" Water Lateral	1,536.50	0.00	0.00		0.00	0.00%		
086	2.5" Water Lateral	628.32	0.00	0.00	0.00	0.00	0.00%	628.32	0.00

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ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	WORK CO FROM PREVIOUS APPLICATION (D + E)	MPLETED THIS PERIOD	MATERIALS PRESENTLY STORED (NOT IN D OR E)	TOTAL COMPLETED AND STORED TO DATE (D + E + F)	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
087	Fire Hydrants	9,028.92	0.00	0.00	0.00	0.00	0.00%	9,028.92	0.00
088	Valves, Fittings & RPZS	85,335.60	0.00		0.00	0.00	0.00%		
089	Water Testing	15,252.30	0.00	0.00	0.00	0.00	0.00%	15,252.30	0.00
	Connect to Existing Sewer Manhole	10,285.80	0.00		0.00		0.00%		
	Standard Manhole	18,591.30					0.00%		
092	8" Sewer Line	30,729.46	0.00	0.00	0.00	0.00	0.00%	30,729.46	0.00
093	6" Sewer Lateral with Cleanouts	8,023.00	_ 0.00		0.00	1	0.00%		
	Sewer Testing	5,909.40	0.00	0.00	0.00	0.00	0.00%	5,909.40	0.00
095	2" Diameter Schedule 80 PVC Conduit	126,549.00	0.00	0.00	0.00	0.00	0.00%	126,549.00	0.00
	2" Diameter Schedule 80 PVC Conduit Directional Bore	7,442.25	0.00	0.00	0.00	0.00	0.00%	7,442.25	0.00
097	Handhole	5,698.35	0.00	0.00	0.00	0.00	0.00%	5,698.35	0.00
098	Terminal Renovation & Expansion	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
099	Gate 1 Counter Inserts (Allowance No. 1)	7,000.00	0.00	0.00	0.00	0.00	0.00%	7,000.00	0.00
100	Gate 2 Counter Inserts (Allowance No. 2)	7,000.00	0.00	0.00	0.00	0.00	0.00%	7,000.00	0.00
101	Temporary Signage (Allowance No. 3)	10,000.00	0.00	0.00	0.00	0.00	0.00%	10,000.00	0.00
	Plan Review, Bldg. Permit, Utility, Tap & Misc Fees (Allowance No. 4)	125,000.00	0.00	0.00	0.00	0.00	0.00%	125,000.00	0.00
103	Soil Testing for Percolation Rates & Composition Adjustment (Allowance	10,000.00	0.00	0.00	0.00	0.00	0.00%	10,000.00	0.00

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	No. 5)								
104	Cost to Move TSA and LEO Offices (Allowance No. 6)	200,000.00	0.00	0.00	0.00	0.00	0.00%	200,000.00	0.00
105	Fine Grading - Landscaping	3,150.00	0.00	0.00	0.00	0.00	0.00%	3,150.00	0.00
	Soil Amendments -								
106	Landscaping	682.50	0.00		0.00	0.00	0.00%		0.00
107	Herbicide	367.50	0.00	0.00	0.00	0.00	0.00%	367.50	0.00
100	Landscaping with Required Irrigation System Complete per	60 922 27	0.00	0.00	0.00	0.00	0.00%	69,823.37	0.00
108	Plan SOD, Zoysia Japonica	69,823.37	0.00	0.00	0.00	0.00	0.0070	09,623.37	0.00
109	'Zeon', Korean Grass	9,680.00	0.00	0.00	0.00	0.00	0.00%	9,680.00	0.00
110	Phase 1 - Year 1 Maintenance	2,100.00	0.00	0.00	0.00	0.00	0.00%	2,100.00	0.00
111	Phase 1 - Year 2 Maintenance	2,100.00	0.00	0.00	0.00	0.00	0.00%	2,100.00	0.00
112	Phase 1 - Year 3 Maintenance	2,100.00	0.00	0.00	0.00	0.00	0.00%	2,100.00	0.00
113	Phase 2 - Year 1 Maintenance	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
114	Phase 2 - Year 2 Maintenance	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
115	Phase 2 - Year 3 Maintenance	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
116	Phase 6 - Year 1 Maintenance	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
117	Phase 6 - Year 2 Maintenance	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
118	Phase 6 - Year 3 Maintenance	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00

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	Reduced Pressure Principle Backflow						0.000/		0.00
	Preventer Cover	2,940.00	0.00	0.00	0.00	0.00	0.00%	2,940.00	0.00
	5-Luminaire LED Apron Floodlight Pole with 50-Ft Mtg Height,	80,000.00	0.00	0.00	0.00	0.00	0.00%	80,000.00	0.00
	Complete	80,000.00	0.00	0.00	0.00	0.00	0.00%	80,000.00	0.00
121	Reinforced Concrete Transformer Pad	10,678.50	0.00	0.00	0.00	0.00	0.00%	10,678.50	0.00
122	Reinforced Concrete Generator Pad	3,150.00	0.00	0.00	0.00		0.00%		
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
	Terminal Renovation & Expansion	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
201	Furniture - Allowance	257,638.54	0.00	0.00	0.00	0.00	0.00%	257,638.54	0.00
202	Gate Counter Insert - Allowance	7,000.00	0.00	0.00	0.00	0.00	0.00%	7,000.00	0.00
203	Bonds / Insurance / License	370,000.00	370,000.00	0.00	0.00	370,000.00	100.00%	0.00	37,000.00
204	General Conditions	1,993,000.00	764,784.93	50,000.00	0.00	814,784.93	40.88%	1,178,215.07	81,478.49
205	Temporary Construction	284,000.00	0.00	0.00	0.00	0.00	0.00%	284,000.00	0.00
206	Scheduling	54,000.00	21,500.00	1,350.00	0.00	22,850.00	42.31%	31,150.00	2,285.00
207	Selective Demolition	140,000.00	0.00	28,000.00	0.00	28,000.00	20.00%	112,000.00	2,800.00
208	Soil Modification	59,000.00	0.00	0.00	0.00	0.00	0.00%	59,000.00	0.00
209	Concrete - General Conditions	129,000.00	0.00	0.00	0.00		0.00%		0.00
210	Concrete - Foundations	596,000.00	0.00	0.00	0.00		0.00%		0.00
211	Concrete - SOG	483,000.00	0.00	0.00	0.00		0.00%		
212	Concrete - SOD	66,000.00	0.00	0.00	0.00		0.00%		0.00
213	Concrete - Steps / Ramp	38,000.00	0.00	0.00	0.00		0.00%		0.00
214	Masonry	167,000.00	0.00	0.00	0.00	0.00	0.00%	167,000.00	0.00
215	Structural Steel - Bonding	30,000.00	30,000.00	0.00	0.00	30,000.00	100.00%	0.00	3,000.00

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216	Structural Steel - Detailing	117,000.00	94,000.00	0.00	0.00	94,000.00	80.34%	23,000.00	9,400.00
217	Structural Steel - Fabricated - Material	1,735,000.00	445,000.00	0.00	0.00	445,000.00	25.65%	1,290,000.00	44,500.00
218	Miscellaneous Iron - Fabricated - Material	83,000.00	0.00	0.00	0.00	0.00	0.00%	83,000.00	0.00
219	Metal Decking - Material	320,000.00	0.00	0.00	0.00		0.00%		
220	Steel Erection	919,000.00	0.00	0.00			0.00%		0.00
221	Light Guage Truss	6,000.00	0.00	0.00			0.00%		0.00
222	Non-Ferrous Metals	47,000.00	0.00	0.00			0.00%		0.00
223	Rough Hardware	16,000.00	0.00	0.00	0.00		0.00%		0.00
224	Rough Carpentry	42,000.00	0.00	0.00	0.00		0.00%		0.00
225	PVC Brackets	17,000.00	0.00	0.00	0.00	0.00	0.00%		0.00
226	Casework	351,000.00	0.00	0.00	0.00	0.00	0.00%	351,000.00	0.00
227	Finish Carpentry	69,000.00	0.00	0.00	0.00	0.00	0.00%	69,000.00	0.00
228	Air Barrier	11,000.00	0.00	0.00	0.00	0.00	0.00%	11,000.00	0.00
229	Metal Roofing	1,533,000.00	0.00	0.00	0.00	0.00	0.00%	1,533,000.00	0.00
230	Membrane Roofing	62,000.00	0.00	0.00	0.00	0.00	0.00%	62,000.00	0.00
231	Cement Siding	282,000.00	0.00	0.00	0.00	0.00	0.00%	282,000.00	0.00
232	Sealants / Firestopping	28,000.00	0.00	0.00	0.00	0.00	0.00%	28,000.00	0.00
233	EJ Covers	8,000.00	0.00	0.00	0.00	0.00	0.00%	8,000.00	0.00
234	Hollow Metal Doors	87,000.00	0.00	0.00	0.00	0.00	0.00%	87,000.00	0.00
235	Wood Doors	21,000.00	0.00	0.00	0.00	0.00	0.00%	21,000.00	0.00
236	Coiling Grilles	71,000.00	0.00	0.00	0.00	0.00	0.00%	71,000.00	0.00
237	Storefront - Framing - Material	481,000.00	0.00	0.00	0.00	0.00	0.00%	481,000.00	0.00
238	Storefront - Glazing - Material	259,000.00	0.00	0.00	0.00	0.00	0.00%		0.00
239	Frit Graphic	13,000.00	0.00	0.00	0.00	0.00	0.00%		0.00
240	Automatic Doors	35,000.00	0.00	0.00	0.00	0.00	0.00%	35,000.00	0.00
241	Finish Hardware	153,000.00	0.00	0.00	0.00	0.00	0.00%	153,000.00	0.00

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242	Stucco	131,000.00	0.00	0.00	0.00	0.00	0.00%	131,000.00	0.00
243	Drywall - Framing	768,000.00	0.00	0.00	0.00	0.00	0.00%	768,000.00	0.00
244	Drywall - Insulation	43,000.00	0.00	0.00	0.00	0.00	0.00%		0.00
245	Drywall - GWB	473,000.00	0.00	0.00	0.00	0.00	0.00%		0.00
246	Drywall - Finishing	201,000.00	0.00	0.00	0.00	0.00	0.00%	201,000.00	0.00
247	Glass Reinforced Gypsum	158,000.00	0.00	0.00	0.00	0.00	0.00%		0.00
248	Ceramic Tile	85,000.00	0.00	0.00	0.00		0.00%		0.00
249	Terrazzo	472,000.00	0.00	0.00	0.00		0.00%		
250	Acoustical Ceilings	289,000.00	0.00	0.00	0.00		0.00%		0.00
251	Resilient Tile / Carpet	104,000.00	0.00	0.00	0.00		0.00%		0.00
252	Painting / Coatings	235,000.00	0.00	0.00	0.00		0.00%		0.00
253	Toilet Partitions	37,000.00	0.00	0.00	0.00		0.00%		0.00
254	Corner Guards	2,000.00	0.00	0.00	0.00		0.00%		0.00
255	Flagpoles	11,000.00	0.00	0.00	0.00		0.00%		0.00
256	Signage	54,000.00	0.00	0.00	0.00	0.00	0.00%	54,000.00	0.00
257	Flight Information Displays	47,000.00	0.00	0.00	0.00		0.00%		0.00
258	Lockers	4,000.00	0.00	0.00	0.00	0.00	0.00%	4,000.00	0.00
259	Fire Protection Specialties	3,000.00	0.00	0.00	0.00		0.00%		0.00
260	Awnings	4,000.00	0.00	0.00	0.00		0.00%		0.00
261	Toilet Accessories	12,000.00	0.00	0.00	0.00		0.00%		0.00
262	Rooftop Screens	48,000.00	0.00	0.00	0.00		0.00%		0.00
263	Maintenance Equipment	39,000.00	0.00	0.00	0.00	0.00	0.00%	39,000.00	0.00
	Audio Visual								4
264	Equipment	30,000.00	0.00	0.00	0.00		0.00%		0.00
265	Pedestrian Controls	112,000.00	0.00	0.00	0.00		0.00%		0.00
266	Kitchen Appliances	2,000.00	0.00	0.00	0.00	0.00	0.00%	2,000.00	0.00
267	Gate Equipment - Alternate 1A	1,402,000.00	0.00	0.00	0.00	0.00	0.00%	1,402,000.00	0.00
268	Gate Equipment -	1,414,000.00	0.00	0.00	0.00	0.00	0.00%	1,414,000.00	0.00

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	Alternate 1B (Allowance)								
269	Fire Protection - Design	15,000.00	0.00	3,000.00	0.00	3,000.00	20.00%	12,000.00	300.00
270	Fire Protection	332,000.00	0.00	0.00	0.00	0.00	0.00%	332,000.00	0.00
271	Plumbing - Underground - Material	25,000.00	0.00	0.00	0.00	0.00	0.00%	25,000.00	0.00
272	Plumbing - Underground - Labor	54,000.00	0.00	0.00	0.00	0.00	0.00%	54,000.00	0.00
273	Plumbing - Drain, Waste, Vent - Material	40,000.00	0.00	0.00	0.00	0.00	0.00%	40,000.00	0.00
274	Plumbing - Water - Material	58,000.00	0.00	0.00	0.00	0.00	0.00%	58,000.00	0.00
275	Plumbing - Wall Rough - Labor	254,000.00	0.00	0.00	0.00	0.00	0.00%		0.00
276	Plumbing - Insulation	38,000.00	0.00	0.00	0.00	0.00	0.00%	38,000.00	0.00
277	Plumbing - Fixtures - Material	33,000.00	0.00	0.00	0.00	0.00	0.00%	33,000.00	0.00
278	Plumbing - Fixtures - Labor	23,000.00	0.00	0.00	0.00	0.00	0.00%	23,000.00	0.00
279	HVAC - General Conditions	435,000.00	0.00	10,000.00	0.00	10,000.00	2.30%	425,000.00	1,000.00
280	HVAC - Split System - Material	267,000.00	0.00	0.00	0.00	0.00	0.00%	267,000.00	0.00
281	HVAC - Split System - Labor	41,000.00	0.00	0.00	0.00	0.00	0.00%	41,000.00	0.00
282	HVAC - High Volume Low Speed Exhaust Fans - Material	42,000.00	0.00	0.00	0.00	0.00	0.00%	42,000.00	0.00
283	HVAC - High Volume Low Speed Exhaust Fans - Labor	19,000.00	0.00	0.00	0.00	0.00	0.00%	19,000.00	0.00
284	HVAC - Wall Heaters	17,000.00		0.00	0.00		0.00%		0.00
285	HVAC - Exhaust Fans	14,000.00	0.00	0.00	0.00	0.00	0.00%		0.00

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User Notes:

A	В	С	D	Е	F	G		Н	I
			WORK CO	MPLETED	MATERIALS	TOTAL			
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	PRESENTLY STORED (NOT IN D OR E)	COMPLETED AND STORED TO DATE	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
	HVAC - Distribution - Material	51,000.00	0.00	0.00	0.00	0.00	0.00%	51,000.00	0.00
287	HVAC - Distribution - Labor	12,000.00	0.00	0.00		 -	0.00%		
	HVAC - Louvers	23,000.00	0.00	0.00	0.00	0.00	0.00%	23,000.00	0.00
289	HVAC - Vibration Isolation	40,000.00	0.00	0.00	0.00	0.00	0.00%	40,000.00	0.00
290	HVAC - Piping - Material	135,000.00	0.00	0.00	0.00	0.00	0.00%		
	HVAC - Piping - Labor	179,000.00	0.00	0.00	0.00	0.00	0.00%	179,000.00	0.00
292	HVAC - Ductwork - Material	116,000.00	0.00	0.00	0.00	0.00	0.00%	116,000.00	0.00
293	HVAC - Ductwork - Labor	103,000.00	0.00	0.00	0.00	0.00	0.00%	103,000.00	0.00
294	HVAC - Insulation	105,000.00	0.00	0.00	0.00	0.00	0.00%	105,000.00	0.00
	HVAC - Test, Adjust, Balancing	13,000.00	0.00	0.00	0.00	0.00	0.00%	13,000.00	0.00
	HVAC - Startup	13,000.00	0.00	0.00	0.00	0.00	0.00%		
	HVAC - Controls	168,000.00	0.00	0.00	0.00		0.00%		
298	Electrical - Bonding	52,000.00	52,000.00	0.00	0.00	52,000.00	100.00%	0.00	5,200.00
299	Electrical - Demolition	38,000.00	0.00	22,800.00	0.00	22,800.00	60.00%	15,200.00	2,280.00
300	Electrical - SOG - Rough	375,000.00	0.00	0.00	0.00	0.00	0.00%	375,000.00	0.00
	Electrical - Wall / OH - Rough	820,000.00	0.00	0.00	0.00	0.00	0.00%	820,000.00	0.00
	Electrical - Fixtures - Material	825,000.00	0.00	0.00	0.00	0.00	0.00%	825,000.00	0.00
	Electrical - Switch Gear - Material	225,000.00	0.00	0.00	0.00	0.00	0.00%		0.00
304	Electrical - Generator - Material	623,000.00	0.00	0.00	0.00	0.00	0.00%	623,000.00	0.00
	Electrical - Site Lighting	165,000.00	0.00	0.00	0.00	0.00	0.00%	165,000.00	0.00
306	Electrical - Raceways	495,000.00	0.00	0.00	0.00	0.00	0.00%	495,000.00	0.00

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User Notes:

Α	В	С	D	Е	F	G		Н	I
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	WORK CO FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	MATERIALS PRESENTLY STORED (NOT IN D OR E)	TOTAL COMPLETED AND STORED TO DATE (D + E + F)	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
307	Electrical - Wiring	165,000.00	0.00	0.00	0.00	0.00	0.00%	165,000.00	0.00
308	Electrical - Trim	548,000.00	0.00	0.00	0.00	0.00	0.00%	548,000.00	0.00
309	Cabling	182,000.00	0.00	0.00	0.00	0.00	0.00%	182,000.00	0.00
1	Access Control / Intrusion / Variable Message Signs	475,000.00	0.00	258,182.00	0.00	258,182.00	54.35%	216,818.00	25,818.20
	Fire Alarm	71,000.00		0.00	0.00	0.00	0.00%	71,000.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
	GRAND TOTAL	\$30,898,447.83	\$1,980,701.72	\$812,207.18	\$0.00	\$2,792,908.90	9.04%	\$28,105,538.93	\$279,290.89

\$0.00		\$4,112.50	\$6.58	SF	625	REFLECTORIZED WHITE	30
\$0.00		\$31,570.00	\$7.00	S TI	4,510	PAVEMENT MARKING REMOVAL- AIRSIDEANY COLOR ON ANY PAVEMENT	29
\$0.00		\$15,356.25	\$47.25	두	325	NEW 8-FT CHAIN LINK FENCE WITH 3 STRANDS BARBED WIRE BLACK COATED	28
\$0.00		\$1,575.00	\$1,575.00	EA	_	REMOVE CHAIN LINK SLIDING GATE AND ALL RELATED APPURTENANCES, ANY SIZE	27
\$0.00		\$2,142.00	\$4.20	T :	510	REMOVE CHAIN LINK FENCE, ANY HEIGHT	26
\$0.00		\$4,200.00	\$2,100.00	ĒA	2	TEMPORARY 24-FOOT WIDE MANUAL DOUBLE SWING GATE	25
\$9,072.00	216.00	\$25,830.00	\$42.00	듀	615	TEMPORARY CONSTRUCTION FENCE	24
\$0.00		\$92,373.75	\$47.25	듀	1,955	TEMPORARY SIDA FENCE	23
\$0.00		\$3,082.00 \$7,324.80	\$61.64 \$7.324.80	<u> </u>	50	STORM DRAIN-AIRSIDE STORM DRAINAGE MANHOLE	22
\$0.00		\$9,243.00	\$61.62	F	150.0	6-INCH DIAMETER SCHEDULE 80 PVC STORM DRAIN-AIRSIDE 4-INCH DIAMETER SCHEDULE 80	20
\$0.00		\$6,860.70	\$2,286.90	ΕA	3.0	STORM DRAIN CLEANOUT IN PAVEMENT AND GRASS AREAS	19
\$0.00		\$70,052.25	\$150.65	두	465	12-INCH DIAMETER SCHEDULE 80 PVC STORM DRAIN-AIRSIDE	18
\$507.15	1.00	\$507.15	\$507.15	ΕA	1	REMOVE PIPE BOLLARD	17
\$0.00		\$10,662.75	\$33.85	SY	315	CONCRETE PAVEMENT REMOVAL-AIRSIDE, ANY THICKNESS	16
\$48,266.40	910.00	\$48,266.40	\$53.04	SΥ	910	CONCRETE REMOVAL- LANDSIDE AND AIRSIDE	15
\$0.00		\$4,578.40	\$57.23	SY	80	ASPHALT PAVEMENT REMOVAL- AIRSIDE, ANY THICKNESS	14
\$883.20	80.00	\$64,032.00	\$11.04	SΥ	5,800	ASPHALT REMOVAL	13
\$0.00		\$29,865.60	\$87.84	ΥS	340	1.5" THICK ASPHALT MILLING	12
\$0.00		\$1,121.40	\$280.35	ΕA	4	SEDIMENT TUBES	11
\$0.00		\$76,256.25	\$36.75	<u> </u>	2,075	TEMPORARY FENCE AROUND BIORETENTION SWALE	10
\$0.00		\$5,926.20	\$348.60	ΕA	17.0	INLET PROTECTION	9
\$0.00	Barrell Section	\$3,458.70	\$1,729.35	m A	2	ROCK CHECK DAMS	8
\$0.00		\$8,452.50	\$8,452.50	LS		SEEDING	7
\$0.00		\$1,428.00	\$1.428.00	<u> </u>	4,000	CONCRETE WASHOUT	o (
\$0.00		\$12,672.00	\$9.60	- F	1,320	TREE PROTECTION FENCING	1 n
\$15,229.20	1.00	\$15,229.20	\$15,229.20	LS	1	CONSTRUCTION ENTRANCE	ω
\$0.00		\$25,000.00	\$25,000.00	LS		CONTROL PROGRAM	N
\$0.00		\$355,962.60	\$355,962.60	LS	_	MOBILIZATION	
							BASE B
(8)	(7)	(6)	(5)	(4)	(3)	(2)	(1)
Amount Earned	No. of	Contract	Unit	Unit	Quantity	Detailed Estimate	No.
ne This Period	Work Done		Contract			and Description of Unit	No.
		RPORT	HILTON HEAD ISLAND AIRPORT	ON HEA	HILT		

***		#P0P; - 10:- 0	411		.,200		
		200 740 70	2007	2	1 200	6-INCH THICK PORTLAND	64
\$0.00		\$108,023.10	\$211.81	두	510	CONCRETE PAVERS-LANDSIDE	63
\$0.00		\$66,845.70	\$43.69	LF	1,530	CONCRETE CURB-LANDSIDE	62
\$0.00		\$10,092.00	\$33.64	GAL	300	TACK COAT-LANDSIDE	61
\$0.00		\$212,730.00	\$50.65	ΥS	4,200	8" AGGREGATE BASE COURSE- LANDSIDE	60
\$0.00		\$227,640.00	\$54.20	SY	4,200	2" ASPHALT SURFACE COURSE- LANDSIDE	59
\$0.00		\$125,703.50	\$302.90	СХ	415	BIORETENTION/BIOSWALE SOIL MEDIA CONSTRUCTION	58
\$0.00		\$266,332.50	\$266,332.50	LS	_1	ROOF DRAINAGE COLLECTION SYSTEM	57
\$0.00		\$4,060.35	\$4,060.35	EA	1	FOR UNDERDRAIN	56
\$0.00		\$55,033.24	\$137.24		401	12" PERFORATED UNDERDRAIN WITH STONE TRENCH	55
\$0.00		\$17,360.10	\$3,472.02	EA	5	CONCRETE FLUMES	54
\$0.00		\$32,677.75	\$92.05	ᄕ	355	18" RCP	53
\$0.00		\$15,228.18	\$76.91	ᄕ	198	15" RCP	52
\$0.00		\$27,080.00	\$169.25	ΥS	160	RIP RAP OVER FILTER FABRIC	51
\$0.00		\$41,296.50	\$4,588.50	EA	9	YARD INLET WITH DOMED GRATE	50
\$0.00		\$91,459.68	\$7,621.64	ΕA	12	STORM DRAIN BUBBLER BOX	49
\$0.00		\$23,868.60	\$5,967.15	ΕA	4	STORM DRAIN GRATE INLET	48
\$0.00		\$181,428.00	\$11.63	ΥS	15,600	FINE GRADING	47
\$0.00		\$66,286.00	\$60.26	CY	1,100	MUCK & FILL	46
\$70,597.80	1,638.00	\$219,810.00	\$43.10	ςγ (5,100	IMPORT FILL MATERIAL	45
, 20¢	1,322.30	\$13,473.00	\$14.97	2 2	9000	CUT TO FILL-LANDSIDE	4
263	1 522 50	\$58 815 90	\$41 13	2	1 430	STRIPPING TOPSOIL	43
\$0.00		\$17,400.00	\$34.80	СХ	500	UNSUIITABLE EXCAVATION- AIRSIDE	42
\$0.00		\$66,805.00	\$43.10	СУ	1,550	EMBANKMENT IN PLACE- IMPORT FILL-AIRSIDE	41
		\$5,250.00	\$5,250.00	SJ	1	CONDUIT REMOVAL	40
\$231,	132.00	\$231,739.20	\$1,755.60	ΕA	132	TREE REMOVAL	39
\$0.00	Town of the last	\$23,679,60	\$23.679.60	LS		MISC. DEMOLITION	38
\$0.00		\$10,242.80	\$17.66	듀	580	WATERLINE DEMOLITION & REMOVAL	37
\$0.00		\$19,216.80	\$4.71	SF	4,080	PAVEMENT MARKING-BLACK	36
\$0.00		\$484.90	\$7.46	SF	65	PAVEMENT MARKING-NON REFLECTORIZED RED	35
\$0.00		\$6,960.00	\$5.80	SF	1,200	PAVEMENT MARKING- REFLECTORIZED RED	34
\$0.00		\$361.20	\$9.03	SF	40	PAVEMENT MARKING-NON- REFLECTORIZED YELLOW	33
\$0.00		\$6,985.60	\$5.92	SF	1,180	PAVEMENT MARKING- REFLECTORIZED YELLOW	32
\$0.00		\$7,752.00	\$5.70	SF	1,360	PAVEMENT MARKING-NON- REFLECTORIZED WHITE	31
(8)	(7)	(6)	(5)	(4)	(3)	(2)	(1)
Amount Earned	No. of Units	Contract	Unit Price	Unit	Quantity	Detailed Estimate	No.
Done This Period	Work Do		Contract			and Description of Unit	No.
		RPORT	HILTON HEAD ISLAND AIRPORT	ON HEA			

00.00		\$3,080,33	\$1,088.40	5	U		5
\$0.00		\$7,442.25	\$99.23	! <u>~</u>	75	BORT	27
						2-INCH DIAMETER SCHEDULE 80 PVC CONDUIT DIRECTIONAL	96
\$0.00		\$126,549.00	\$46.87	듀	2,700	2-INCH DIAMETER SCHEDULE 80 PVC CONDUIT	95
\$0.00	The state of the s	\$5,909.40	\$5,909.40	LS	1	SEWER TESTING	94
\$0.00		\$8,023.00	\$80.23	됴	100	6" SEWER LATERAL WITH CLEANOUTS	93
\$0.00		\$30,729.46	\$79.61	Fi.	386	8" SEWER LINE	92
\$0.00		\$18,591.30	\$6,197.10	ΕA	3	STANDARD MANHOLE	91
\$0.00		\$10,285.80	\$10,285.80	ΕA	1	CONNECT TO EXISTING SEWER MANHOLE	90
\$0.00		\$15,252.30	\$15,252.30	LS	1	WATER TESTING	89
\$0.00		\$85,335.60	\$85,335.60	SJ	1	VALVES, FITTINGS, & RPZS	88
\$0.00		\$9,028.92	\$9,028.92	ΕA	1	FIRE HYDRANTS	87
\$0.00		\$628.32	\$28.56	F	22	2.5" WATER LATERAL	86
\$0.00		\$1,536.50	\$21.95	두 !	70	2" WATER LATERAL	85
\$0.00		\$16,842.00	\$16,842.00	ΕA	_	FREE-STANDING FDC	82
\$0.00		\$11,010.90	\$43.18	F.	255	6" PVC FIRE LINE	83
\$0.00		\$239.40	\$39.90	듀	6	6" PVC WATER LINE	82
\$0.00		\$56,838.40	\$88.81	두	640	10" PVC WATER LINE	81
\$0.00		\$17,947.65	\$17,947.65	LS	_	TIE-IN TO EXISTING WATERLINE	80
\$0.00		\$22,641.15	\$22,641.15	LS	_	STRIPING, SIGNAGE, & MARKING	79
\$0.00		\$144.90	\$144.90	ΕA	1	WOOD DUMPSTER ENCLOSURE	78
\$0.00		\$19,674.95	\$231.47	SY	85	6" CONCRETE DUMPSTER PAD	77
\$0.00		\$28,933.54	\$28,933.54	LS	1	HANDICAP RAMPS WITH DETECTABLE WARNINGS	76
\$0.00		\$7,969.50	\$144.90	ΕA	55	CONCRETE WHEELSTOP	75
\$0.00		\$173,166.00	\$364.56	YS	475	INTERNALLY PIGMENTED CONCRETE CROSSWALKS	74
\$0.00		\$58,287.90	\$114.29	SY	510	4" OYSTER SHELL CONCRETE WALKWAY	73
\$0.00		\$3,472.00	\$173.60	YS	20	4" CONCRETE PAD FOR BIKE RACKS	72
\$0.00		\$11,522.50	\$92.18	SY	125	4" CONCRETE SIDEWALK- AIRSIDE	71
\$0.00		\$77,523.38	\$92.18	SY	841	4" CONCRETE SIDEWALK- LANDSIDE	70
\$0.00		\$4,485.00	\$14.95	GAL	300	BITUMINOUS TACK	69
\$0.00		\$469,211.55	\$561.93	NOT	835	BITUMINOUS BASE COURSE	68
\$0.00		\$8,195.50	\$327.82	ΥS	25	8-INCH THICK PORTLAND CEMENT CONCRETE PAVEMENT (REINFORCED)	67
\$0.00		\$30,968.30	\$281.53	ΥS	110	8-INCH THICK PORTLAND CEMENT CONCRETE	66
\$0.00		\$127,180.20	\$237.72	SY	535	6-INCH THICK PORTLAND CEMENT CONCRETE PAVEMENT (REINFORCED)	65
(8)	(7)	(6)	(5)	(4)	(3)	(2)	(1)
Zillogirt Egilled	Units	Amount	Price	=	Quality	סלמווסט באוווומנס	
) Topod			<u>-</u>	2			Item
Done This Period	Work Do	4	Contract			and Description of Unit	No.
		₹PORT	HILTON HEAD ISLAND AIRPORT	ON HEA	===		

\$0.00		\$10,678.50	\$10,678.50	Ę			
						REINFORCED CONCRETE	121
\$0.00		\$80,000.00	\$40,000.00	EA	2	5-LUMINAIRE LED APRON FLOODLIGHT POLE WITH 50-FT MOUNTING HEIGHT, COMPLETE	120
\$0.00		\$2,940.00	\$2,940.00	EĄ		REDUCED PRESSURE PRINCIPLE BACKFLOW PREVENTER COVER	119
\$0.00		\$0.00	\$0.00	LS.	1	PHASE 6 - YEAR 3 MAINTENANCE	118
\$0.00		\$0.00	\$0.00	LS	_	PHASE 6 - YEAR 2 MAINTENANCE	117
\$0.00		\$0.00	\$0.00	LS		PHASE 6 - YEAR 1 MAINTENANCE	116
\$0.00		\$0.00	\$0.00	LS	1	PHASE 2 - YEAR 3 MAINTENANCE	115
\$0.00		\$0.00	\$0.00	LS		PHASE 2 - YEAR 2 MAINTENANCE	114
\$0.00		\$0.00	\$0.00	LS.	1	PHASE 2 - YEAR 1 MAINTENANCE	113
\$0.00		\$2,100.00	\$2,100.00	LS.	1	PHASE 1 - YEAR 3 MAINTENANCE	112
\$0.00		\$2,100.00	\$2,100.00	LS	1	PHASE 1 - YEAR 2 MAINTENANCE	111
\$0.00		\$2,100.00	\$2,100.00	LS	<u> </u>	PHASE 1 - YEAR 1 MAINTENANCE	110
\$0.00		\$9,680.00	\$1.21	SF	8,000	SOD, ZOYSIA JAPONICA 'ZEON', KOREAN GRASS	109
\$0.00		\$69,823.37	\$69,823.37	LS		LANDSCAPING WITH REQUIRED IRRIGATION SYSTEM COMPLETE PER PLAN	108
\$0.00		\$367.50	\$367.50	LS	1	HERBICIDE	107
\$0.00		\$682.50	\$682.50	LS	1	SOIL AMENDMENTS- LANDSCAPING	106
\$0.00		\$3,150.00	\$3,150.00	LS	1	FINE GRADING-LANDSCAPING	105
\$0.00		\$200,000.00	\$200,000.00	ALLOW	1	COST TO MOVE TSA AND LEO OFFICES (ALLOWANCE NO. 6)	104
\$0.00		\$10,000.00	\$10,000.00	ALLOW	1	PERCOLATION RATES AND COMPOSITION ADJUSTMENT (ALLOWANCE NO. 5)	
\$0.00		\$125,000.00	\$125,000.00	ALLOW		PERMIT, UTILITY TAP AND MISC. FEES (ALLOWANCE NO. 4)	3
\$0.00		\$10,000.00	\$10,000.00	ALLOW	1	(ALLOWANCE NO. 3)	100
\$0.00		\$7,000.00	\$7,000.00	ALLOW		(ALLOWANCE NO. 2)	100
\$0.00		\$7,000.00	\$7,000.00	ALLOW	1	(ALLOWANCE NO. 1)	99
\$0.00		\$21,642,000.00	\$21,642,000.00	LS.	_	TERMINAL RENOVATION AND EXPANSION AS DEPICTED IN THE CONTRACT DOCUMENTS TO INCLUDE ALL CONTRACT ITEMS NOT INDICATED ELSEWHERE ON THE BID FORM	98
(8)	(7)	(6)	(5)	(4)	(3)	(2)	(1)
Amount Earned	No. of	Contract	Unit	Unit	Quantity	Detailed Estimate	N _o
one Inis Period	WORK Done		Contract			and Description of Unit	Item
	No. I.	RPORT	HILTON HEAD ISLAND AIRPORT	ON HEA	F.		

Page 5 of 6

\$0.00	1 240 W C 1 1 1 1	\$3,150.00	\$3,150.00	ΕA	1	GENERATOR PAD	
						REINFORCED CONCRETE	122
(8)	(7)	(6)	(5)	(4)	(3)	(2)	(1)
	Units	Amount	Price				
Amount Earned	No. of	Contract	Unit	Unit	Quantity	Detailed Estimate	No.
							Item
Work Done This Period	Work Do		Contract			No. and Description of Unit	No.

Base Bid Total

\$27,196,809.29

\$438,915.38

PAY REQUEST MARKUP SHEET

Page 6 of 6

No. Item 3 No. and Description of Unit **Detailed Estimate** 2 TERMINAL IMPROVEMENTS-PHASE 1-BASE BID
HILTON HEAD ISLAND AIRPORT Quantity (3) Unit 4 Contract Price Unit (5) Amount Contract 6 No. of Units **Work Done This Period** 3 **Amount Earned** 8

			Γ .			
7	o	თ	4	ယ	2	
BID ALTERNATE NO. 11 - 2- LUMINAIRE LED APRON FLOODLIGHT POLE WITH 45-FT MOUNTING HEIGHT, COMPLETE	BID ALTERNATE NO. 10 - 1- LUMINAIRE LED APRON FLOODLIGHT POLE WITH 45-FT MOUNTING HEIGHT, COMPLETE	BID ALTERNATE NO. 9 - GATE COUNTER INSERTS TO INCLUDE \$7,000 ALLOWANCE	BID ALTERNATE NO. 7 - HOLDROOM UPFIT	BID ALTERNATE NO. 2 - FURNITURE ALLOWANCE	BID ALTERNATE NO. 1B - GATE 2 AIRCRAFT GATE EQUIPMENT TO INCLUDE 2A \$35,000 SPARE PARTS ALLOWANCE	BID ALTERNATE NO. 1A - GATE 1 AIRCRAFT GATE EQUIPMENT TO INCLUDE 2A \$35,000 SPARE PARTS ALLOWANCE
		_			2	
LS.	LS.	LS	LS	ALLOW	LS	LS
\$76,000.00	\$76,000.00	\$7,000.00	\$469,000.00	\$257,638.54	\$1,414,000.00	\$1,402,000.00
\$76,000.00	\$76,000.00	\$7,000.00	\$469,000.00	\$257,638.54	\$1,414,000.00	\$1,402,000.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Edison Foard Representative Signature Alternate Bid Total TOTAL AMOUNT TBE RPR Signature Tom Mullen \$30,898,447.83 \$3,701,638.54 Thomas A \$438,915.38 \$0.00

PAY REQUEST NUMBER:

5

PERIOD ENDING:

2/29/2024

PRELIMINARY



INVOICE

Direct Inquires To: Johnson Controls, Inc.

4415 Sea Ray Drive

North Charleston, SC 29405

Federal ID#: 39-0380010

Phone: 843-744-7144 Fax: 843-744-5553

BIII To: QUALITY ELECTRICAL SYSTEMS

BEAUFORT, SC 29901 PO BOX 1405

Mail Check To: Johnson Controls PO Box 730068

Dallas, TX 75373

For ACH/EFT information email: co-cashappusa@jci.com

01/01/24 - 01/31/24	Period Covered	SC2992600		Hilton Head Island Terminal Improvements	Project Name / Project Site / Tax Loc
	Application # Invoice Number	Nathan Sanborn	12/04/23	Signed Proposal	Purchase Order / Date / Authorized By JCI Project / CO
	Invoice Date		000	4N940013	JCI Project / CO
NET 30	Terms			EURY, JERRY M	JCI Project Manager

Original Contract Amount: \$516,364.00	01/01/24 - 01/31/24	Period Covered	
34.00	1	Application #	
Please revie		Invoice Number	
Please review this summary of our invoice		Invoice Date	
ur invoice for this month and give me	NET 30	Terms	

Work Completed To Date: Less Retention: Total Less Retention:	Original Contract Amount: Approved Change Orders: New Contract Amount:
\$258,182.00 \$0.00 \$258,182.00	\$516,364.00 \$0.00 \$516,364.00
Summary of work performed: For more details please call.	Please review this summary of our invoice for this month and give me a call as soon as possible if you disapprove of the amounts scheduled. The original Application and Certificate for payment will follow by mail.

\$0.00 \$258,182.00 \$0.00

Total Amount Due This Invoice: \$258,182.00

Less Invoiced To Date:

-									_	
	6	Ġ	4	ယ	2	_		A	Item	
Totals	Job Complete	Installation	Material	Engineering	Project Start Up	%50 Deposit	Base Contract	В	Description	Work
\$516,364.00	\$29,431.50	\$82,484.00	\$53,321.50	\$41,309.00	\$51,636.00	\$258,182.00		C	Value	Scheduled
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		D	Application	Previous
\$0.00 \$258,182.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$258,182.00		П	Place	Work In
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		71	Material	Stored
\$258,182.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$258,182.00		G (D+E+F)	and Stored	Total Complete
50%	0%	0%	0%	0%	0%	100%		H (G/C)	Percent	
50% \$258,182.00	\$29,431.50	\$82,484.00	\$53,321.50	\$41,309.00	\$51,636.00	\$0.00		I (C-G)	To Finish	Balance
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		J	Retention	



North Charleston, S.C. 29405 4415 Sea Ray Drive C 843-200-3303 Johnson Controls, Inc

November 7, 2023

INGENDITY WELCOME

To: Quality Electric Systems

Nathan Sanborn

Hilton Head Island Airport Terminal Improvements

systems. Our scope would include supplying and installing the following equipment and/or services for: Based on drawings E0.1, E0.3, E2.0, E2.1, E2.1A E2.2, E2.2A E2.3, E2.4, E2.5, E2.6, E4.1, E4.2, T001, T002, T100, T100A, T101, T101A, T102, T102A, T103, T201 dated 5/10/2023, we are proposing to supply and install

283100 Fire Alarm System

Total Cost \$ 68,115.00

282300 Video Management System (VMS) 281000 Access Control / Intrusion Detection

Total Cost \$ 448,249.00

Clarifications, Exclusions:

- personnel, CAT 6 cable and cable installation for the cameras, fiber, fiber connections. include power supplies for locks, network, proximity cards, IP Addresses, data base for HHI Airport monitors and cabinets for FIDS and Holding Areas, any millwork, patch panels, door hardware to boxes, phone lines, backboxes, any lifts needed, raceways, and conduits with a pull string, poles, The Electrical Contractor, General Contractor or other divisions will provide all 110 power, back
- JCI is excluding the following:
- Badge entry equipment as stated on 281000-9 item H,
- Management as defined in Section K on page 281000-10 including keys. Vehicle Permit Information can be entered in a custom data field created for permit information. Hirsch product that isn't specified and not what JCI is not providing. JCI is excluding the Asset System Requirements, Section I states workstation shall be equipped with Velocity 3.6. Velocity is a 2. The following from the RFP is excluded due to no response to our RFI. Section 281000-9 in 1.17
- JCI has excluded equipment racks.
- 4. JCI has excluded TSA Badging station requirements as stated on 281000-21 item 6 referencing Fingerprint Capture Device.
- 5. JCI has excluded the 55" and 65" displays and any housing cabinets for them as specified in
- and what information is to be read from the card 6. JCI has excluded the High Assuarance authentication to validate the card against Federal database
- JCI acknowledges (7) Addendum.
- Patching, painting, device relocation, and tile replacement not included
- Shipping and applicable tax are INCLUDED in proposed price.
- All work to be performed during normal business hours Mon-Fri 8am-5pm

Controls, Inc., Milwaukee, (IMPORTANT: This proposal incorporates by reference the terms and conditions on the following page hereof.) This proposal is hereby accepted and Johnson Controls is authorized to proceed with the work, subject to credit approval by Johnson Wisconsin

This proposal is valid until December 1, 2023

Purchase Company Name

至る Signature JANBURN

Name:

JOHNSON CONTROLS, INC

Jerry Eury

mature

Name:

Security Installation Ops Manager

TERMS AND CONDITIONS

By accepting this proposal, Purchaser agrees to these terms and conditions:

- to those set forth herein. Seller's failure to object to provisions contained in any communication from Buyer shall not be deemed a waiver of these Standard Terms and Conditions. References to "products" or "equipment" herein shall mean the product and equipment to be furnished by Seller as identified on the applicable Seller Quotation. These Standard Terms and Conditions may be modified or rescinded only by a writing signed by authorized representatives of both Seller and Buyer. (1) AGREEMENT AND LIMITATIONS. This document (the "Agreement") sets forth the terms and conditions of any sale by Seller of the specified product, equipment or services indicated on the reverse side hereof or attachment and is expressly made conditional on the assent of Buyer (hereinafter "Buyer") to these Standard Terms and Conditions. Buyer's acceptance of any part of the product, equipment or services sold or Buyer's instructions to Seller to begin work or to ship any product or equipment after receipt of these Standards Terms and Conditions shall constitute such assent, and a waiver of all terms and conditions in its purchase order or similar document which are different from or additional
- (2) TERMINATION OR MODIFICATION. Accepted orders may by cancelled or modified by Buyer only with Seller's express written consent. If cancellation or modification is allowed, Buyer agrees to pay to Seller all expenses incurred and damage sustained by Seller on account of such cancellation or modification, plus a reasonable profit.
- before-shipment basis. In the case of export sales, unless otherwise agreed to in writing by Seller, all payments are to be by means of a confirmed irrevocable letter of credit. Invoicing disputes must be identified in writing within 21 days of the date of invoice. Payments of any disputed amounts are due and payable upon resolution. All other amounts remain due within 30 days. In the event of Buyer's default, the balance of any outstanding amounts will be immediately due and payable. Failure to make payments when due will give Seller, without prejudice to any other right or remedy, the right to: (i) stop performing any services, withhold deliveries of equipment and other materials, terminate or suspend any unpaid software licenses, and/or terminate this Agreement; and (ii) charge Buyer interest on the amounts unpaid at a rate equal to the lesser of one and one half (1.5) percent per month or the maximum rate permitted under applicable law, until payment is made products may be adjusted by Seller, upon notice to Buyer at any time prior to shipment, to reflect any increase in Seller's cost of raw materials (e.g., steel, aluminum) incurred by Seller after issuance of Seller's applicable proposal or quotation. Price and delivery is F.O.B. point of manufacture, unless otherwise provided. Unless otherwise agreed to in writing by Seller, all payments are due net thirty (30) days from the date made on a cash-in-advance basis only, in Seller's sole discretion. of invoice. Seller may, at its sole option, have the right to make any delivery under this Agreement payable on a cash or payment guarantee before-shipment basis. In the case of export sales, unless otherwise agreed to in writing by Seller, all payments are to be by means of a Shipments to Buyer with outstanding invoices unpaid after thirty (30) days will be suspended until all overdue invoices are paid or (3) PRICE, SHIPMENT, AND PAYMENT. Prices on accepted orders are firm for a period of 90 days from date of acceptance. Prices for
- invoice (4) DEPOSIT. Buyer agrees to pay a deposit equal to 50% of the sell price (pre-tax) prior to Seller performing work. Seller will generate pice for the 50% deposit within three business days after Seller's receipt of a written agreement or order from Buyer. Seller will not work until receipt of the deposit.
- (5) TAXES. All prices exclude federal, harmonized, state/provincial and local use, sales or similar applicable taxes. Such taxes, applicable, will appear as separate items on the invoice unless Buyer provides a tax exemption certificate that is acceptable to taxing authorities
- (6) DELIVERY. The delivery date(s) provided by Seller for the product and equipment is only an estimate and is based upon prompt receipt of all necessary information from Buyer. The delivery date(s) is subject to and shall be extended by delays caused by strikes, fires, accidents, shortages of labor or materials, embargoes, or delays in transportation, compliance with government agency or official requests, or any other similar or dissimilar cause beyond the reasonable control of Seller. FAILURE TO DELIVER WITHIN THE TIME ESTIMATED SHALL NOT BE A MATERIAL BREACH OF CONTRACT ON SELLER'S PART. If Buyer causes Seller to delay shipment or completion of the product or equipment, Seller shall be entitled to any and all extra cost and expenses resulting from such delay.
- quality and that the services provided by Seller will be provided in a good and workmanlike manner for a period of twelve (12) months from initial product startup, or eighteen (18) months from product shipment, whichever occurs first (the "Warranty Period") unless such Warranty Period is modified by Seller's proposal. Alongside this limited warranty, for all new York air or water-cooled chillers and/or Metasys building together with all limitations of that manufacturer's warranty to Buyer. This warranty does not cover failures caused in whole or in part by products and equipment are provided with the third-party manufacturer's warranty to the extent available, and Seller will transfer the benefits <u>https://www.johnsoncontrols.com/yearoneservice</u> (collectively, offered Year One Service is declined. No warranty is provided. automation systems installed in the US and Canada and sold through Seller owned and operated branches Seller also provides (7) LIMITED WARRANTY. Seller warrants that the product and equipment furnished by Seller under this Agreement will be of good maintenance performed by anyone o, such No warranty is provided for third-party products and equipment installed or furnished by Seller. Such equipment, the scope, limitations, terms and constructions purchase price "Year One Service"). Seller will not provide a credit against purchase price "Year One Service"). other than Seller; (ii) improper use or application; (iii) corrosion;

Allowance Log

Hilton Head Island Terminal Improvements Phase I

Pay App #5 - February 2024

Item Number	Description	Scheduled Value	From Previous Application	This Period	Total Completed To Date	% Complete	Balance To Finish	Retainage
1	Gate 1 Counter Inserts (Allowance No. 1)	7,000			-	0%	7,000	0
2	Gate 2 Counter Inserts (Allowance No. 2)	7,000			-	0%	7,000	-
3	Temporary Signage (Allowance No. 3)	10,000			-	0%	10,000	-
4	Plan Review, Bldg. Permit, Utility Tap & Misc Fees (Allowance No. 4	125,000			-	0%	125,000	-
5	Soil Testing for Percolation Rates & Composition Adjustment (Allowance No. 5)	10,000			-	0%	10,000	2
6	Cost to Move TSA and LEO Offices (Allowance No. 6)	200,000			-	0%	200,000	-
7	Contingeny Allowance	1,414,000			-	0%	1,414,000	-
	Grand Totals	1,773,000	0	0	0	0%	1,773,000	0



STATE OF NORTH CAROLINA COUNTY OF MECKLENBURG

PARTIAL WAIVER OF LIEN

materials in connection with improvements on the following described project: Whereas, the undersigned has been employed by and/or contracted with Beaufort County to furnish labor and/or

Hilton Head Island Airport – Terminal Improvements Phase I 120 Beach City Road Hilton Head Island, South Carolina 29926

claims, or right of lien or claim under the statutes of the State of North Carolina, on the above described premises 29, 2024. and improvements thereon on account of labor and/or materials furnished by the undersigned on or before February The undersigned, for and in consideration of receipt of \$730,986.46 does hereby waive and release any and all liens, Unpaid retainage is excluded from this agreement.

Contractor: Edison Foard, LLC

PO Box 19888

Charlotte, NC 28219-0888

Signed by: Nicholas Roberts
Title: Project Manager

Title: Project Manage Signature: M. John Manage

THE STATE OF: North Carolina

COUNTY OF: Mecklenburg

acknowledged the due execution of the foregoing instrument. Witness my hand and official seal this 6th day of March_2024. Lisa R Wilbanks, Notary Public, do hereby certify that Nicholas Roberts, personally appeared before me this day and

quai of whiteness

Notary Public Signature

Print: Lisa R. Wilbanks

My commission expires: June 28, 2026

LISA R. WILBANKS
(Sea NOTARY PUBLIC
Mecklenburg County
North Carolina

My Commission Expires June 28, 2026

NC License #1685

DBE PARTICIPATION REPORT

Date: 2/30/2024 CONTRACT NO. FAA AIP NO. 3-45-0030-45-2020, 3-45-0030-50-2022 OWNER: PROJECT: TERMINAL IMPROVEMENTS-PHASE 1-IFB# 041923 Beaufort County, South Carolina CONTRACTOR: Edison Foard, LLC TOTAL DBE AMOUNT IN BID \$0.00 CONTRACT AMOUNT: % DBE IN BID 0.00% \$27,196,809.29 CURRENT PERIOD FROM: 2/1/2024 TO: 2/30/2024 DBE/WBE **DESCRIPTION OF** DBE WBE SUPPLIER SUB OTHER SUBCONTRACTOR'S EARNING THIS EARNING TO DATE SUBCONTRACTOR WORK AGREED AMOUNT PERIOD * NONE THIS PERIOD * If No Activity This Pay Request Period, Enter "NONE THIS PERIOD" **TOTAL VALUE OF WORK PERFORMED** I hereby certify that the above statement is true and correct and BY PRIME CONTRACTOR TO DATE supporting documentation is on file and is available for inspection at any time. TOTAL DBE EARNING TO DATE \$0.00 #DIV/0! CONTRACTOR: Edison Foard, LLC DBE% OF WORK PERFORMED TO DATE

Signed: Date:

6-Mar-24

U.S. Department of Labor

PAYROLL

Wage and Hour Division

For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

WAGE AND HOUR DIVISION
Revised December 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR OR SUBCONTRACTOR Edison Foard, LLC						ADD	ADDRESS PO Box 19888 Charlotte, NC 28219						OMB No. 1235-0008 Expires 09/30/2026				
PAYROLL NO. FOR WEEK ENDING 02/03/2024			PRO HI- 12	PROJECT AND LOCATION HHIA - Terminal Improvements - Phase 1 120 Beach City Road, Hilton Head Island, SC 29926 PROJECT OR CONTRAC									CT NO.				
(1)	(2) SNC	(3)	OR ST.	(4) [AY AND	DATE	(5))	(6)	(7)	(7) (8) DEDUCTIONS GROSS WITH- AMOUNT HOLDING					(9)	
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	OT. OF	HOURS W	/ORKED	EACH DA	TOT.	AL RS	RATE OF PAY	GROSS AMOUNT EARNED					OTHER	TOTAL DEDUCTIONS	NET WAGES PAID FOR WEEK
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date3/7/2024			(b) WHERE FRINGE BENEFITS ARE I	PAID IN CASH					
Mark Kolb	Vice President								
(Name of Signatory Party)	(Title)		nanic listed in the above referenced payroll has been paid, ayroll, an amount not less than the sum of the applicable						
do hereby state:		basic hourly wage rat	te plus the amount of the required fringe benefits as listed as noted in section 4(c) below.						
(1) That I pay or supervise the payment of th	e persons employed by		(c) EXCEPTIONS						
Edison F	oard, LLC	on the	(c) EXCEPTIONS						
(Contractor or S.	bcontractor)		EXCEPTION (CRAFT)	EXPLANATION					
HHIA Terminal Improvements - Phase	1 ; that during the payroll period commer	ncing on the							
(Building or Work)	3rd Eebruan	2024							
	d ending the 3rd day of February	-11							
all persons employed on said project have been pubeen or will be made either directly or indirectly to		ates have	24						
Edison Foa	ard, LLC	from the full							
(Contractor or S	Subcontractor)	_ 110111 410 1411							
weekly wages earned by any person and that no from the full wages earned by any person, other the 3 (29 C.F.R. Subtitle A), issued by the Secretary of 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C	an permissible deductions as defined in Řegu f Labor under the Copeland Act, as amended	lations, Part							
			REMARKS:						
(2) That any payrolls otherwise under this co- correct and complete; that the wage rates for labor applicable wage rates contained in any wage dete- set forth therein for each laborer or mechanic confi-	rmination incorporated into the contract; that the	ess than the							
(3) That any apprentices employed in the abo program registered with a State apprenticeship ag Training, United States Department of Labor, or if with the Bureau of Apprenticeship and Training, U	no such recognized agency exists in a State, a	hip and							
П	AID TO APPROVED PLANS, FUNDS, OR PR		NAME AND TITLE Mark Kolb, Vice President	SIGN ATURE					
the above referenced payr	orly wage rates paid to each laborer or mechalor, payments of fringe benefits as listed in the appropriate programs for the benefit of such the below.	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF TITLE 31 OF THE UNITED STATES CODE.							

U.S. Department of Labor Wage and Hour Division

PAYROLL

For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

WAGE AND HOUR DIVISION
Revised December 2008

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NAME OF CONTRACTOR OR SUBCONTRACTOR Edison Foard, LLC						ADDRESS PO Box 19888 Charlotte, NC 28219								235-0008 30/2026
PAYROLL NO. FOR WEEK ENDING 02/10/2024			10/2024	PROJEC HHIA 120 E	T NO.									
(1) (2)		(3)	ST.	(4) DAY AND DATE	(5)	(6)	(7)			DED	(8) UCTIONS			(9)
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	OT. OR ST	HOURS WORKED EACH DAY	TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	WITH- HOLDING FICA TAX				OTHER	TOTAL DEDUCTIONS	NET WAGES PAID FOR WEEK
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborar or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date3/7/2024		(b) WHERE FRINGE BENEFITS ARE PA	AID IN CASH						
Mark Kolb	Vice President	☐ — Each laborer or mechanic listed in the above referenced payroll has been p							
(Name of Signatory Party)	(Title)	as indicated on the pay	roll, an amount not less than the sum of the applicable						
do hereby state:		basic hourly wage rate	plus the amount of the required fringe benefits as listed as noted in section 4(c) below.						
(1) That I pay or supervise the payment of the person	ns employed by		as noted in section 4(e) below.						
Edison Foard, L	LC on the	(c) EXCEPTIONS							
(Contractor or Subcontra		EXCEPTION (CRAFT)	EXPLANATION						
HHIA Terminal Improvements - Phase 1 (Building or Work) 4th day of February , 2024 , and ending									
all persons employed on said project have been paid the f been or will be made either directly or indirectly to or on be	ull weekly wages earned, that no rebates have								
Edison Foard, LLG	from the full								
(Contractor or Subconti									
weekly wages earned by any person and that no deduction the full wages earned by any person, other than perm 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145	hissible deductions as defined in Regulations, Part under the Copeland Act, as amended (48 Stat. 948,								
(2) That any payrolls otherwise under this contract recorrect and complete; that the wage rates for laborers or applicable wage rates contained in any wage determination set forth therein for each laborer or mechanic conform with (3) That any apprentices employed in the above perioderogram registered with a State apprenticeship agency recording. United States Department of Labor, or if no such with the Bureau of Apprenticeship and Training, United States	nechanics contained therein are not less than the incorporated into the contract; that the classifications in the work he performed. d are duly registered in a bona fide apprenticeship cognized by the Bureau of Apprenticeship and recognized agency exists in a State, are registered	REMARKS:							
(4) That: (a) WHERE FRINGE BENEFITS ARE PAID TO		NAME AND TITLE Mark Kolb, Vice President	SIGNATURE						
the above referenced payroll, payr	e rates paid to each laborer or mechanic listed in ments of fringe benefits as listed in the contract priate programs for the benefit of such employees, w.	THE WILLFUL FALSIFICATION OF ANY OF THE ABOV SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUT TITLE 31 OF THE UNITED STATES CODE.	E STATEMENTS A PSUBJECT THE CONTRACTOR OR ION. SEE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF						

U.S. Department of Labor Wage and Hour Division

PAYROLL

For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

WAGE AND HOUR DIVISION
Revised December 2008

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NAME OF CONTRACTOR OR SUBCONTE	_	oard, LLC			ADDRE	OMB No. 1235-0008 Expires 09/30/2026										
PAYROLL NO. 17		FOR WEEK ENDIN		7/2024	PROJE HHIA 120 E	CT AND LOCATI	on mprovements oad, Hilton He	- Phase ead Islan	1 d, SC 2992	PROJECT OR CONTRACT NO. IFB #041923						
(1) (2) SWIGTON NAME AND INDIVIDUAL IDENTIFYING NUMBER """ """ """ """ """ """ """	61	(3)	SST.	(4) DAY AND DATE	(5)	(6)	(7)			DED	(8) DUCTIONS			(9) NET		
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	OT. OR ST.	HOURS WORKED EACH DAY	TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX			OTHER	TOTAL DEDUCTIONS	WAGES		
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Public Burden Statement

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Date	3/7/2024		(b) WHERE FRINGE BENEFITS ARE PAID I	N CASH
Mark Kolb Vice President		Vice President	_	
.,	(Name of Signatory Party)	(Title)		sted in the above referenced payroll has been paid, an amount not less than the sum of the applicable
do hereb	by state:			the amount of the required fringe benefits as listed
(1)	That I pay or supervise the payment of the pers	ons employed by	(c) EXCEPTIONS	
	Edison Foard,	LLC on the	(c) EXCEPTIONS	
	(Contractor or Subcon	ractor)	EXCEPTION (CRAFT)	EXPLANATION
HH		; that during the payroll period commencing on the		
11th	(Building or Work) day of February 2024, and endi	ng the 17th day of February 2024		
		full weekly wages earned, that no rebates have		
	Edison Foard, L	LC from the fu	11	
	(Contractor or Subco	ntractor)		
from the	full wages earned by any person, other than pe	tions have been made either directly or indirectly missible deductions as defined in Regulations, Part in under the Copeland Act, as amended (48 Stat. 94.5), and described below:		
correct a applicable set forth (3) To program Training, with the	and complete; that the wage rates for laborers of le wage rates contained in any wage determinat therein for each laborer or mechanic conform w That any apprentices employed in the above per registered with a State apprenticeship agency of United States Department of Labor, or if no sur Bureau of Apprenticeship and Training, United States	od are duly registered in a bona fide apprenticeship ecognized by the Bureau of Apprenticeship and th recognized agency exists in a State, are registere		
(4) 1	in addition to the basic hourly wa the above referenced payroli, pa	D APPROVED PLANS, FUNDS, OR PROGRAMS ge rates paid to each laborer or mechanic listed in yments of fringe benefits as listed in the contract opriate programs for the benefit of such employees, low.	NAME AND TITLE Mark Kolb, Vice President THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE ST SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. TITLE 31 OF THE UNITED STATES CODE.	

U.S. Department of Labor

Wage and Hour Division

PAYROLL



For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR ADDRESS PO Box 19888 OR SUBCONTRACTOR OMB No. 1235-0008 Charlotte, NC 28219 Expires 09/30/2026 Edison Foard, LLC PROJECT OR CONTRACT NO. PROJECT AND LOCATION FOR WEEK ENDING PAYROLL NO. HHIA - Terminal Improvements - Phase 1 18 02/24/2024 IFB #041923 120 Beach City Road, Hilton Head Island, SC 29926 (4) DAY AND DATE (2) (6) (7) (1) (3) (9) OF HHOLDING MPTIONS DEDUCTIONS OR ST. NET NAME AND INDIVIDUAL IDENTIFYING NUMBER **GROSS** WITH-WAGES OT. (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY TOTAL RATE AMOUNT HOLDING TOTAL PAID WORK HOURS WORKED EACH DAY HOURS OF PAY EARNED FICA TAX OTHER DEDUCTIONS FOR WEEK NUMBER) OF WORKER CLASSIFICATION NOTHING TO REPORT 0 0 s 0 0 0 S 0 s 0 0

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the precading week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborar or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date3/7/2024			(b) WHERE FRINGE BENEFITS ARE F	PAID IN CASH						
Mark Kolb	Vice President									
(Name of Signatory Party)	(Title)			anic listed in the above referenced payroll has been paid, ayroll, an amount not less than the sum of the applicable						
do hereby state:			basic hourly wage rat	e plus the amount of the required fringe benefits as listed t as noted in section 4(c) below.						
(1) That I pay or supervise the payment of the person	ens employed by			it as noted in section 4(c) below.						
Edison Foard, I	· · ·	on the	(c) EXCEPTIONS							
(Contractor or Subcontra		on the	EXCEPTION (CRAFT)	EXPLANATION						
HHIA Terminal Improvements - Phase 1	; that during the payroll period commen	cing on the								
(Building or Work)				×						
18th day of February , 2024 , and endin	g the 24th day of February	_,,								
all persons employed on said project have been paid the been or will be made either directly or indirectly to or on b		ites have								
Edison Foard, LL	C	from the full								
(Contractor or Subcont		TOTT GIO TOT								
weekly wages earned by any person and that no deductifrom the full wages earned by any person, other than person (29 C.F.R. Subtitle A), issued by the Secretary of Labor 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145	missible deductions as defined in Řegula under the Copeland Act, as amended (ations, Part								
(2) That any payrolls otherwise under this contract recorrect and complete; that the wage rates for laborers or applicable wage rates contained in any wage determination set forth therein for each laborer or mechanic conform with (3) That any apprentices employed in the above period program registered with a State apprenticeship agency resulting. United States Department of Labor, or if no such	mechanics contained therein are not le on incorporated into the contract; that the the the work he performed. and are duly registered in a bona fide app accognized by the Bureau of Apprenticesh	ess than the e classifications prenticeship nip and	REMARKS:							
with the Bureau of Apprenticeship and Training, United St (4) That: (a) WHERE FRINGE BENEFITS ARE PAID TO	tates Department of Labor.		NAME AND TITLE	SIGNATURE // /						
			Mark Kolb, Vice President							
the above referenced payroll, pay	ge rates paid to each laborer or mechai rments of fringe benefits as listed in the opriate programs for the benefit of such a low.	ne contract		OVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR UTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF						

U.S. Department of Labor

Wage and Hour Division

PAYROLL

WAGE AND HOUR DIVISION
Revised December 2008

For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

	ME OF CONTRACTOR OR SUBCONTRACTOR Alarm, Fire & Security										ADDRESS P O Box 2072 Bluffton, SC 29910									235-0008 30/2026
PAYROLL NO.		FOR WEEK ENDIN									Hilto	CT AND LOCAT n Head Islan Beach City F	OR CONTRAC	RACT NO.						
(1)	(2) 9Ni((3)				(4) DAY AND DATE					(5)	(6)	(7)			DED	(8) DUCTIONS			(9) NET
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	OT OR	12	-	14	15	16	17	18	-	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX	State Tax		OTHER	TOTAL DEDUCTIONS	WAGES
Miller, Devin - 9744		Hourly	0	0.00	0.00	0.00	0.00	0,00	0,00	0,0			\$124.60	\$67.68	\$32.00	\$31.96		\$78.75	\$210.39	\$749.61
	0		9	0.00	5.00	0.00	0.00	0.00	0.00	0.00	5.00	24.00 0.92	\$960.00	\$67.00	\$52.00	401.70				
			c																\$0.00	
	1		9	,															30.00	
	2	9	c	,																
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				3	\dagger															

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week," U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing date sources, gathering and maintaining the date needed, and completing and reviewing the collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Lebor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date02/28/2024		(b) WHERE FRINGE BENEFITS ARE PAID	IN CASH
Julie Ann Jencks	Accounting Manager	- Fach lahams as machanic	listed in the above referenced payroll has been paid,
(Name of Signatory Party)	(Title)	as indicated on the payroll	an amount not less than the sum of the applicable
do hereby state:		basic hourly wage rate plu in the contract, except as	s the amount of the required fringe benefits as listed noted in section 4(c) below.
(1) That I pay or supervise the payment of the persor	ns employed by		.,
Alarm, Fire & Sec		(c) EXCEPTIONS	
(Contractor or Subcontra	Ultile	EXCEPTION (CRAFT)	EXPLANATION
	that during the payroll period commencing on the		
(Building or Work) 12th day of February 2024, and ending	the 18th day of February 2024		
all persons employed on said project have been paid the f been or will be made either directly or indirectly to or on be	ull weekly wages earned, that no rebates have		
Alarm, Fire & Secur	rity from the full		
(Contractor or Subcont	ractor)		
weekly wages earned by any person and that no deduction from the full wages earned by any person, other than perm 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145	nissible deductions as defined in Regulations, Part under the Copeland Act, as amended (48 Stat. 948,		
	i .		
н			
		REMARKS:	
(2) That any payrolls otherwise under this contract re- correct and complete; that the wage rates for laborers or applicable wage rates contained in any wage determination set forth therein for each laborer or mechanic conform with	mechanics contained therein are not less than the nincorporated into the contract; that the classifications		
(3) That any apprentices employed in the above perior program registered with a State apprenticeship agency re- Training, United States Department of Labor, or if no such with the Bureau of Apprenticeship and Training, United St	cognized by the Bureau of Apprenticeship and recognized agency exists in a State, are registered		
	APPROVED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE Julie Ann Jencks, Accounting Manager	SIGNATURE JUCIN
the above referenced payroll, pay	e rates paid to each laborer or mechanic listed in ments of fringe benefits as listed in the contract priate programs for the benefit of such employees, bw.	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION TITLE 31 OF THE UNITED STATES CODE.	STATEMENTS MAY SUBJECT THE CONTRACTOR OR N. SEE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF

CLELAND CONSTRUCTORS, INC. P. O. BOX 3822

Pay Period Date: Week Ending: Payroll No: 02/10/24 02/10/24 4

Certified Payroll Report

Contract #: Job No: Job Name: 1069 1069

HILTON HEAD AIRPORT EXPAN

3LUFFTON, SC 29910 843 987-0500

Hours # Exemptions Check Totals SUN MON TUE WED THU FRI SAT Social Security Totals Deductions Total Rate Gross Pay 09 10 Work Class 06 07 80 **Employee** 04 05 Fed W/H 61.15 Gross 827.50 NELSON, THEOPHILUS T Ex: S-00 B M 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 FICA 63.30 0.00 0.00 0.00 3.00 15.00 45.00 Taxes 158.79 S 0.00 3.00 ***-**-3288 0.00 0.00 State W/H 34,34 Deducts 0.00 0.00 Vacation **OPERATOR-EXCAVATOR** Local W/H 0.00 Add-Ons 0.00 Holiday 0.00 Wcomp/Sdi 0.00 Net Pay 0.00 Sick 668.71 Check # Other Job Pay 508190 0.00 Total Job Pay 45.00 596.26 Fed W/H 133.35 Gross 7.50 7.50 15.00 39.75 1,681.26 Ex: S-04 B M 0 0.00 0.00 0.00 0.00 0.00 WHITE, JOHNNY LEE, JR FICA 124.32 Taxes 10.00 10.00 0.00 0.00 40.00 26.50 1,060.00 317.14 S 0.00 10.00 10.00 ***-**-7024 State W/H 59.47 Deducts 180.31 0.00 Vacation **OPERATOR-EXCAVATOR** Local W/H 0.00 Add-Ons 0.00 0.00 Holiday Wcomp/Sdi 0.00 Net Pay Sick 0.00 1,183.81 CHILD SUPP 103.95 Check #: Other Job Pay 508229 0.00 **HEALTH INS** 53.05 Total Job Pay 1,656.26 UNIFORMS-17.38 OFFICE FEE 3.00 **DENTAL INS** 2.93

Statement of Compliance

FEBRUARY 22, 2024	Contract Number: 1069
ta S. Mixson, HR/Payroll Manager do hereby state:	
That I pay or supervise the payment of the persons employed by CLELAND CONSTRUCTORS, INC. on the HILTON HEAD AIRPORUARY, 2024, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or d by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, land Act, as amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 3145), and described below:	ORT EXPAN, that during the payroll period commencing on the 4 day of FEBRUARY, 2024 and ending the 10 day of will be made either directly or indirectly to or on behalf of said CLELAND CONSTRUCTORS, INC. from the full weekly wages other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the
That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete: that the wage rates for laborassifications set forth therein for each laborer or mechanic conform with the work he performed.	overs or mechanics contained therein are not less than the applicable wage tales contained in any wage determination incorporated into the contract; that
That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship gistered with the Bureau of Apprenticeship and Training, United States Department of Labor.	agency recognized by the Bureau of Apprenticeship and Training. United States Department of Labor, or if no such recognized agency exists in a State,
) 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 above referenced payroll, payments of frigonous first and the first section 4(c) below.	nge benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as
(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 Section 4(c) below.	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
(c) EXCEPTIONS	
EXCEPTION (Craft)	EXPLANATION
REMARKS	
NAME AND TITLE	SIGNATURE A CO
Anita S. Mixson, HR/Payroll Manager	7
5.0 So	petron 1001 of Title 18 and Speciate 231 of Title 31 of the United States Code

Certified Payroll Report

Contractor Quality Electrical Systems, Inc. Po Box 1405 Beaufort, SC 29901

Project

Edison Foard:HHI airport PO Box 19888

Charlotte, NC 28219-0888

Project/Contract # Payroll Number For Week Ending

2/7/2024

Hours Worked by Do

		1844-	_	11.				kea by														
		Work	Pay	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Timesheet	Pald	Pav	Joh	Fringe Check	Total	0					
Employee Name		Classification	Type	1 1	2	3	4	5	6	7	Hours	House	Data	Cross Day		Total	Social	Medi-	Federal State		Total	
Garry A. Brigmon	2754	Hourly Regular Rate	RT	6.00	_	_		11.00	10.00	10.00	27.00	07.00	Naue	Gross Pay			Security	care	Tax Tax	Other	Deduct	Net Pay
		,,		0.00				11.00	10.00	10.00	37.00	37.00	34.00	1,258.00	1.09 Draft	1,768.00	109.62	25.64	214.00 99.82	0.00	449.08	1,318.92
Garry A. Brigmon	2754	Overtime	RT	_		6.00		-		0.00												
	2.04	Overanie	KI			0.00				2.00	8.00	8.00	51.00	408.00	1.63 Draft	1,768.00	109.62	25.64	214.00 99.82	0.00	449.08	1,318.92
				_			_															

Mar-06, 2024 han Sanborn , owi	er, do hereby state:	
at I pay or supervis the full weekly wage: Subtitle A), issued b	the payment of the persons employed by Quality Electrical Systems, Inc. on the pleamed, that no rebates have been or will be made either directly or indirectly to or ithe Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat.	roject Edison Foard:HHI airport; that during the payroll period commencing on Feb-01, 2024 and ending on Feb-07, 2024 all persons employed on the said project have on behalf of said Quality Electrical Systems, Inc. from the full weeldy wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (a. 108, 72 Stat. 967; 76 Stat 357; 40 U.S.C. 276c), and described below:
at any payrolls othe e contract; that the	wise under this contract required to be submitted for the above period are correct a dassifications set forth therein for each laborer or mechanic conform with the work I	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 incorporate.
at any apprentices e y exists in a State, a	mployed in the above period are duly registered in a bona fide apprenticeship progrere 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 if no such recognize
at:		
WHERE FRINGE I	ENEFITS ARE PAID TO APPROVED PLANS, FUNDS. OR PROGRAMS didition to the basic hourly wage rates paid to each laborer or mechanic listed in the plat 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, exc
WHERE FRINGE E	ENEFITS ARE PAID IN CASH h laborer or mechanic listed in the above referenced payroll has been paid, as indi- oted in Section 4(c) below.	cated 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, ex
EXCEPTIONS		N
Exception (Cr	ift)	Explanation
———		
Remarks:		
Name and Title Nathan Sanbo		Signature
THE WILLFUL	ALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CO	ONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION, SEE SECTION 1001 OF TITLE 18 AND SECTION 231
OF TITLE 31 O	THE UNITED STATES CODE.	The state of the s

Certified Payroll Report

Contractor Quality Electrical Systems, Inc. Po Box 1405

Beaufort, SC 29901

Project

Edison Foard:HHI airport PO Box 19888

Charlotte, NC 28219-0888

Project/Contract # Payroll Number For Week Ending

2 2/14/2024

Hours Worked by Day

	***				vorked by														
Employee Nove	Work	Pay	Thu F	ri Sat S	Sun Mon	Tue	Wed	Timesheet	Paid	Pav	Joh	Fringe Check	Total	Coolel	20-41				
Employee Name	ID Classification	TVD6	8 9	9 10	11 12	13	14					Code Name	Total	Social	wedi-	Federal	State	Tota	
Daniel L. Scarborougi	6670 Hourly Regular R	ate RT	1.50					110013	Tivula	Mate	GIUSS Pay	Rate Number	Gross Pay	Security	care	Tax	Tax C	Other Deduct	Not Day
	, riogaian i		1.50				10.00	11.50	11.50	26.00	299.00	1.00 Draft	1,040.00				53.23	0.00 240.79	799.21
Garry A. Brigmon	2754 Hourly Regular R	ate DT		0.50	40.00														
	2.04 Flourity Rogular R	alc I(I		8.50	10.00	12.00	9.50	40.00	40.00	34.00	1,360.00	1.03 Draft	1,921.00	119.10	27.85	248.00 1	09.62	0.00 504.57	1,416.43
Garry A. Brigmon	2754 Overtime	RT	11.00																
		KI	11.00					11.00	11.00	51.00	561.00	1.54 Draft	1,921.00	119.10	27.85	248.00 10	09.62	0.00 504.57	1,416.43

ite: Mar-06, 2024 Nathan Sanborn , owner, do here	aby state;	
That I pay or supervise the payme of the full weekly wages earned, the R Subtitle A), issued by the Secret	ent of the persons employed by Quality Electrical Systems, Inc. on the project Edison Foard:HHI airport; that during the payroll period commencing on Feb-08, 202 nat no rebates have been or will be made either directly or indirectly to or on behalf of said Quality Electrical Systems, Inc. from the full weekly wages earned by an etary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat 357; 40 U.S.C. 276c), and described below:	24 and ending on Feb-14, 2024 all persons employed on the said project have been y person, other than permissible deductions as defined in Regulations, Part 3 (29
That any payrolls otherwise under	r this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers and mechanics contained therein are not lead to the second second in the second seco	ss than the applicable wave rates contained in
That any apprentices employed in ancy exists in a State, are registere	n the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor.	aship and Training, United States Department of Labor, of if no such recognized
That:		
(a) WHERE FRINGE BENEFITS A in addition to the noted in Section	ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS he 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 been on 4(c) below.	or will be made to appropriate programs for the benefit of such employees, except as
	ARE PAID IN CASH 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 ction 4(c) below.	rate plus the amount of the required fringe benefits as listed in the contract, except
(c) EXCEPTIONS		
Exception (Craft)	Explanation	
Remarks:		
Name and Title Nathan Sanborn , owner	Signature	
THE WILLFUL FALSIFICAT OF TITLE 31 OF THE UNIT	ITION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SI TED STATES CODE.	ECTION 1001 OF TITLE 18 AND SECTION 231

Certified Payroll Report

Contractor Quality Electrical Systems, Inc. Po Box 1405 Beaufort, SC 29901

Project

Edison Foard:HHI airport PO Box 19888

Charlotte, NC 28219-0888

Project/Contract # Payroll Number For Week Ending

3 2/21/2024

					ours Worl																	
Employee Name	Work ID Classification	Pay Type	Thu 15	Fri 16	Sat Sun 17 18	Mon 19	Tue 20		Timesheet Hours			Job Gross Pay		Check Number	Total Gross Pay			Federal			Total	
Daniel L. Scarborough	6670 Hourly Regular Rate	RT	4.00			4.00	4.00	5.50		17.50				Draft	1,079.00		15.65				255.28	Net Pay 823.72
Demille M. Parker JR	6949 Hourly Regular Rate	RT						5.50	5.50	5.50	18.00	99.00	0.00	Draft	198.00	12.28	2.87	0.00	0.00	0.00	15.15	182.85
Garry A. Brigmon	2754 Hourly Regular Rate	RT	8.50	5.00		10.00	8.50	6.50	38.50	38.50	34.00	1,309.00	1.23	Draft	1,487.50	92.22	21.57	152.00	81.87	0.00	347.66	1,139.84
Garry A. Brigmon	2754 Overtime	RT	2					2.50	2.50	2.50	51.00	127.50	1.85	Draft	1,487.50	92.22	21.57	152.00	81.87	0.00	347.66	1,139.84

I, Nathan Sanborn , owner, do hereby state:	
(1) That I pay or supervise the payment of the persons employed by Quality Electrical Systems, Inc. on the project paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on the CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 10 CFR Subtitle A).	t Edison Foard:HHI airport; that during the payroll period commencing on Feb-15, 2024 and ending on Feb-21, 2024 all persons employed on the said project have been shalf of said Quality Electrical Systems, Inc. from the full weekly wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 , 72 Stat. 967; 76 Stat 357; 40 U.S.C. 276c), and described below:
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and of into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he process.	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 erformed.
(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 Departmen	registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, of it no such recognized to f Labor.
(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 aborated in Section 4(c) below.	ve referenced payroli, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as
(b) WHERE FRINGE BENEFITS ARE PAID IN CASH Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated as noted in Section 4(c) below.	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
(c) EXCEPTIONS	
Exception (Craft)	Explanation
Remarks;	
Name and Title Nathan Sanbom , owner	Signature
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONT OF TITLE 31 OF THE UNITED STATES CODE.	RACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231

Date: Mar-06, 2024

Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

TAX STATEMENT AND CERTIFICATION

|--|

Forms C-5

Forms

Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

STATE AND COUNTY SALES/USE TAX STATEMENT

Contractor (or Subcontractor's) Name Edison Foard, LLC

Job: TERMINAL IMPROVEMENTS - Phase 1 - Hilton Head Island Airport, Hilton Head Island, SC Sheet No. 1 of 2

INVOICE	INVOICE DATES	VENDOR'S NAME	TYPE OF MATERIAL	TOTAL AMOUNT OF INVOICE	SALES	JUSE TAX
1	FROM 2-1 20 24 THRU 2-29 20 24			OF INVOICE	STATE %	COUNTY %
	NOTHING TO REPORT THIS PERIOD					

SUBTOTAL THIS PAGE:_

C-3

Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

TOTAL ALL INVOICES: NOTHING TO REPORT THIS PERIOD

Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

TAX STATEMENT AND CERTIFICATION

Sworn and subscribed before me this and an of Morch 2034 All Market Comments of the comments	are the subcontractors that are engaged by this Contractor in the performance of this Contract whose tax statements are also enclosed herewith. Contractor in the performance of this Contract whose tax		(THE FOLLOWING PORTION TO BE FILLED OUT BY THE GENERAL CONTRACTOR ONLY) It is further certified that:	become a part of the construction of the: TERMINAL IMPROVEMENTS-Phase 1 — Hilton Head Island Airport, Hilton Head Island, SC	This is to certify that the foregoing or attached statement is a true and complete statement of all South Carolina and Local Sales or Use Tax paid by the undersigned Contractor from Feb 1 20 24 to Feb 31, 20 34, inclusive for the materials and equipment that were or will
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(SEAL)

Forms

Hilton Head Island Airport (HXD) Terminal Improvements - Phase I February 15, 2023

TOTAL ALL INVOICES: \$9,579, 21

Forms

Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

STATE AND COUNTY SALES/USE TAX STATEMENT

Contractor (or Subcontractor's) Name___

	356193 356190 169632		INVOICE	Job: TERMIN
	910194 910194 918194	FROM 2 - 1 20 34 THRU 3-31 20 34	INVOICE DATES	AL IMPROVEMENTS - PL
	City Elasters		VENDOR'S NAME	Job: TERMINAL IMPROVEMENTS - Phase I - Hilton Head Island Airport, Hilton Head Island, SC
SUBT	EMT + Fillings Temp purpor panel with		TYPE OF MATERIAL	rt, Hilton Head Island, SC
SUBTOTAL THIS PAGE: 4	3,091.83 399.37 6,087.30		TOTAL AMOUNT	Sh
, 509.21	193.36 28.8° 22.40 3.73 341.40 56.90	STATE %	SALES	Sheet No. 1
	28.87 3.77 56.90	COUNTY	SALES/USE TAX	of 1

Hilton Head Island Airport (HXD) Terminal Improvements - Phase 1 February 15, 2023

TAX STATEMENT AND CERTIFICATION

are the subcontractors that are engaged by this Contractor in the performance of this Contract whose tax statements are also enclosed herewith. Contractor in the performance of this Contract whose tax statements are also enclosed herewith. Contractor in the performance of this Contract whose tax statements are also enclosed herewith. Contractor in the performance of this Contract whose tax statements are also enclosed herewith. Contractor in the performance of this Contract whose tax statements are also enclosed herewith. Contractor in the performance of this Contract whose tax statements are also enclosed herewith. Contractor in the performance of this Contract whose tax statements are also enclosed herewith. Contractor in the performance of this Contract whose tax statements are also enclosed herewith. Contractor in the performance of this Contract whose tax statements are also enclosed herewith. Contractor in the performance of this Contract whose tax statements are also enclosed herewith. Contractor in the performance of this Contract whose tax statements are also enclosed herewith. Contractor in the performance of this Contract whose tax statements are also enclosed herewith. Contractor in the performance of this Contractor in the performance of th		(THE FOLLOWING PORTION TO BE FILLED OUT BY THE GENERAL CONTRACTOR ONLY) It is further certified that:	become a part of the construction of the: TERMINAL IMPROVEMENTS-Phase 1 – Hilton Head Island Airport, Hilton Head Island, SC	This is to certify that the foregoing or attached statement is a true and complete statement of all South Carolina and Local Sales or Use Tax paid by the undersigned Contractor from Feb. 20 24 to Feb 31 , 20 24, inclusive for the materials and equipment that were or will
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Hilton Head Island Airport (HXD) Terminal Improvements – Phase I February 15, 2023

STATE AND COUNTY SALES/USE TAX STATEMENT

Contractor (or Subcontractor's) Name_

	356193		INVOICE	Job: TERMIN
	9/15/94 8/15/94	FROM 2 - 1 20 34 THRU 3-31 20 34	INVOICE DATES	AL IMPROVEMENTS - PH
	City Elastors		VENDOR'S NAME	Job: TERMINAL IMPROVEMENTS - Phase 1 - Hilton Head Island Airport, Hilton Head Island, SC
SUBT	EMT + Fillings Temp punds pand with		TYPE OF MATERIAL	rt, Hilton Head Island, SC
SUBTOTAL THIS PAGE: 9	3,091. 83 3,091. 30		TOTAL AMOUNT	Sł
S0 9.2)	193.36 28.89 341.40 56.90	STATE %	SALES	Sheet No. 1
	3.73 3.73 \$6.90	COUNTY %	SALES/USE TAX	of

Hilton Head Island Airport (HXD) Terminal Improvements -- Phase 1 February 15, 2023

TOTAL ALL INVOICES: \$9,579, 21

Forms

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N

AIRPORT NAME: Hilton Head Island Airport
SCAC NO: 23-029 DATE 06/28/2024
PROJECT DESC: Terminal Expansion
AIP NUMBER: 3-45-0030-045-2020 AIP AMOUNT:\$ 10,000,000
OTHER FUNDS:\$ 0.00 SCAC GRANT AMOUNT:\$ 12,000,000
PERCENT COMPLETED:4%
AMOUNT BILLED TO SPONSOR TO DATE: \$
AMOUNT PAID BY SPONSOR TO DATE: \$2,367,220.92
AMOUNT BILLED TO STATE BY DATE: \$ 337,727.16
AMOUNT PAID BY STATE TO DATE: \$ 0.00
PAYMENT REQUESTED THIS APPLICATION: \$ 193,264.43
This is to certify that the required local funds, a minimum of \$193,264.43 were on hand and have been encumbered for the purpose of matching funds allocated by the SC Aeronautics Commission for this project; and no other state funds will be used to match Aeronautics funds specifically appropriated to the sponsor for this project: and that the city, county, or authority has paid \$2,367,220.92 on the above project. (Include copies of all invoices, charges. cancelled checks, or bank statements)
Signature & Title of County, City, or Authority Representative
This is to certify that all materials have been received and/or all work was performed as specified in the contract documents to the South Carolina Aeronautics Commission.
Signature & Title Airports Director
FOR AERONAUTICS USE ONLY AUT OF GRANT \$ 12,000,000,000
7/18/2024 TOTAL PAID THIS REQUEST \$ AMT REMAINING

Date: 06/27/2024 Airport: HILTON HEAD ISLAND AIRPORT

SCDOA NO: 23-029 Payment Request No. 3

		,								
								AIP SHARE (See		
						INVOICE	Application of	AIP Share		
			CHECK/EFT			AMOUNT (See	FAA 86.19%	Summary Below		
PAYEE	DATE PAID	EFT#	AMOUNT	INVOICE NO.	INVOICE DATE	Summary Below)	Eligibility Ratio	86.1	SCAC	FULL DESC
Previously requested										
EDISON FOARD LLC	2/29/2024	25211	\$ 824,139.65	4-2119-1905	1/30/2024	\$ 774,639.65	\$ 667,644.60	\$ 600,880.14	173,759.51	HXD TERMINAL EXPANSION PROJECT PHASE 1
EDISON FOARD LLC	3/27/2024	25974	\$ 730,986.46	5-2119-1905	2/29/2024	\$ 730,986.46	\$ 630,020.90	\$ 567,018.81	163,967.65	HXD TERMINAL EXPANSION PROJECT PHASE 1
Requested this pay re	equest									
EDISON FOARD LLC	5/2/2024	26817	\$ 861,594.81	6-2119-1905	3/30/2024	\$ 861,594.81	\$ 742,589.31	\$ 668,330.38	193,264.43	HXD TERMINAL EXPANSION PROJECT PHASE 1
Total of all past and o	urrent pay requ	uests				\$ 2,367,220.92			530,991.59	

PAGE: 1 OF 1

EFT NUMBER: 00026817

	\$861,594.81	GL#:10001130 - 57130		
\$861,594.81		HXD TERMINAL EXPANSION PROJECT PHASE 1	PAY APP#6	03/30/2024
INVOICE AMOUNT		DESCRIPTION	INVOICE NUMBER	INVOICE DATE

16268 EDISON FOARD LLC 26817 05/02/2024 \$861,594.81	VENDOR NUMBER VENDOR NAME EFT NUMBER EFT DATE EFT AMOUNT
--	--



Beaufort County Finance

Vendor Number 16268

EFT Number

26817

EFT Date **05/02/2024**

Post Office Drawer 1228

Beaufort, South Carolina 29901-1228
(843) 255-2290

\$861,594.81

Pay *Eight Hundred Sixty-one Thousand Five Hundred Ninety-four Dollars and 81 Cents*

To the EDISON FOARD LLC Order Of PO BOX 19888 CHARLOTTE, NC 28219-0888

NON-NEGOTIABLE



Beaufort County Finance
Post Office Drawer 1228
Beaufort, South Carolina 29901-1228
(843) 255-2290

ADDRESS SERVICE REQUESTED

EDISON FOARD LLC PO BOX 19888 CHARLOTTE, NC 28219-0888

Project No.: 9221-000 The Wilson Group

Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

ESTIMATE FOR PARTIAL PAYMENT

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	No: 6
Owner's Project No.: IFB #041923	TBI Project No.: 2119-1905
Project Name: TERMINAL IMPROVEMENTS-Phase 1	
Contractor: Edison Foard, LLC	Contract Date: September 13, 2023
Application Date: March 25, 2024	For Period Ending: March 30, 2024
Original Contract Price:	\$30,898,447.83
Net Change Orders:	\$0.00

CERTIFICATE OF CONTRACTOR

Retained Percentage (10 %): Total Amount Earned (Col. 9): **Current Contract Price:**

Total Previously Approved: Total Earned Less Retained:

Amount Due This Estimate:

\$861,594.81 \$861,594.81

\$3,375,212.82 \$2,513,618.01 \$375,023.65 \$3,750,236.47 \$30,898,447.83

Total Amount Due:

previous payments received from the Owner for work performed under the Construction Contract have been applied to discharge all obligations changes thereto; that the above is a true and correct statement of the contract up to and including the last day of the period of the estimate; that all that all work has been performed and materials supplied in accordance with the terms and conditions of the Construction Contract and all authorized The undersigned certifies to the best of his knowledge and belief that all items, units, quantities and prices for work and material herein are correct; Contractor: incorporated in the above project are free and clear of all liens, security interests and encumbrances incurred by the undersigned in connection with work covered by prior estimates for partial payment; and that all materials and equipment Title: Project Manager

By: Nicholas Roberts Date: April 2, 2024

CERTIFICATE OF OWNER'S ENGINEERS

I certify that I have verified this Estimate for Partial Payment and that to the best of my knowledge and belief it is a true and correct statement of work performed materials supplied under the Contract.

TALBERT, BRIGHT & Ellington, INC., COLUMBIA, SOUTH CAROLINA

Name:

(Irallahlawar)

Project Engineer / Project Architec

Resident Observer

Thomas A Mullen

BY: Jon Rembold	O Approved and Payment Recommended:
TITLE: Airport Director DATE: 4/19/2024	OWNER'S RECOMMENDATION FOR PAYMENT
	, OWNER

Forms

C-1

Application and Certificate for Payment

TO OWNER:	Hilton Head Island Airport PO Drawer 1228 Beaufort, SC 29901	PROJECT:	HHIA Terminal Impo 120 Beach City Rd Hilton Head Island		APPLICATION NO: 006 PERIOD TO: March 30, 202 CONTRACT FOR: General Co		Distribution to: OWNER:
FROM CONTRACTOR:	Edison Foard, LLC PO Box 19888 Charlotte, NC 28219	VIA ARCHITECT:	The Wilson Group A PO Box 5510 Charlotte, NC 28299		CONTRACT DATE: Septembe PROJECT NOS: / 23-2	т 13, 2023	ARCHITECT: CONTRACTOR:
							FIELD: OTHER:
CONTRACT	OR'S APPLICATION FOR	PAYMENT		The undersigned	Contractor certifies that to	the best of the	Contractor's knowledge,
	ade for payment, as shown below, in co. 3703®, Continuation Sheet, is attached.	nnection with the Cor	ntract.	completed in acco	belief the Work covered by ordance with the Contract Do for Work for which previous	cuments, that all	amounts have been paid
	ITRACT SUM		\$30,898,447.83	payments received	I from the Owner, and that cu	rrent payment sho	wn herein is now due.
	BY CHANGE ORDERS		\$0.00	CONTRACTOR:	118		
	M TO DATE (Line 1 ± 2)		\$30,898,447.83	By: Market		_ Date:	April 02, 2024
4. TOTAL COMPL	ETED & STORED TO DATE (Column G	on G703)	\$3,750,236.47	State of: North Caro	lina		
5. RETAINAGE:				County of: Meckler	•		R. WILBANKS
	of Completed Work	02.45	000.65	Subscribed and swor			TARY PUBLIC
•) + E on G703) of Stored Material	\$347,	223.65	me this 2010 da	ay of Opul, 2024	- Meci	denburg County orth Carolina
(Column F		\$27	800.00	Notary Public:	isa R. Willians	1 My Commissi	orur Carolina on Expires June 28, 2026
•	ge (Lines 5a + 5b or Total in Column I		\$375,023.65	My Commission exp	pires: June 28, 2026	INIY COMMISSION	5/1 Expired dans 10/11010
		•		ADQUITEOTIC	S CERTIFICATE FOR I	DAVMENT	
	D LESS RETAINAGE		\$3,375,212.82				haamistana and dha data
`	ss Line 5 Total) IS CERTIFICATES FOR PAYMENT		¢2 512 619 A1		th the Contract Documents, by pplication, the Architect certification,		
	m prior Certificate)		\$2,513,618.01	Architect's knowle	edge, information and belief	the Work has pro	gressed as indicated, the
(Enic o no	in prior conneate)				rk is in accordance with the (nts, and the Contractor is
8. CURRENT PAY	MENT DUE		\$861,594.81	entitled to paymen	nt of the AMOUNT CERTIFI	ED.	
9. BALANCE TO F	FINISH, INCLUDING RETAINAGE	_		AMOUNT CERTIFIED			\$861,594.81
(Line 3 les	s Line 6)	\$27,523,	235.01	(Attach explanation	if amount certified differs from t the Continuation Sheet that are c	he amount applied.	Initial all figures on this
CHANGE ORD		ADDITIONS	DEDUCTIONS	ARCHITECT:			
	proved in previous months by Owner	\$0.00		Ву:		_ Date:	
Total approved to		\$0.00	\$0.00	This Certificate is r	not negotiable. The AMOUNT	CERTIFIED is nav	able only to the Contractor
	TOTALS	\$0.00		named herein. Issua	nce, payment and acceptance of		
NET CHANGES	S by Change Order		\$0.00	the Owner or Contra	actor under this Contract.		



Continuation Sheet

AIA Document G702®, Application and Certification for Payment, or G732™, Application and Certificate for Payment, Construction Manager as Adviser Edition, containing Contractor's signed certification is attached.

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

APPLICATION NO:
APPLICATION DATE:
PERIOD TO:

006 March 25, 2024 March 30, 2024

ARCHITECT'S PROJECT NO:

23-2932 HHIA Terminal Improvements

Α	В	С	D	E	F	G		Н	I
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	WORK CO FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	MATERIALS PRESENTLY STORED (NOT IN D OR E)	TOTAL COMPLETED AND STORED TO DATE (D + E + F)	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
001	Mobilization	355,962.60	88,991.00	0.00	0.00	88,991.00	25.00%	266,971.60	8,899.10
002	Contractor Quality Control Program	25,000.00	0.00	0.00	0.00		0.00%		
003	Construction Entrance	15,229.20	15,229.20	0.00	0.00	· · · · · · · · · · · · · · · · · · ·	100.00%		
004	Silt Fence	12,672.00		1,996.80	0.00	 	83.11%		
005	Tree Protection Fencing	45,761.20		0.00	0.00		81.05%		
006	Concrete Washout	1,428.00	0.00	1,428.00	0.00		100.00%		142.80
007	Seeding	8,452.50	0.00		0.00		0.00%		
008	Rock Check Dams	3,458.70		0.00			0.00%	 	
009	Inlet Protection	5,926.20	0.00	0.00	0.00	0.00	0.00%	5,926.20	0.00
	Temporary Fence - Bioretention Swale	76,256.25	0.00	0.00	0.00		0.00%		
011	Sediment Tubes	1,121.40	0.00	841.05	0.00	841.05	75.00%	280.35	84.11
012 013	1.5" Thick Asphalt Milling Asphalt Removal	29,865.60 64,032.00		0.00	· · · · · · · · · · · · · · · · · · ·		0.00%	+	
013	Asphalt Pavement Removal - Airside, Any Thickness	4,578.40		0.00			0.00%		
015	Concrete Removal - Landside and Airside Concrete Pavement	48,266.40	48,226.40	0.00	0.00	48,226.40	99.92%	40.00	4,822.64
016 017	Removal - Airside, Any Thickness Remove Pipe Bollard	10,662.75 507.15	507.15	0.00	0.00	507.15	0.00%	0.00	50.72
018	12-inch Diameter	70,052.25	0.00	0.00	0.00	0.00	0.00%	70,052.25	0.00

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User Notes:

Α	В	C	D	E	F	G		H	I
			WORK COMPLETED		MATERIALS	TOTAL			
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	PRESENTLY STORED (NOT IN D OR E)	COMPLETED AND STORED TO DATE	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
	Scheduled 80 PVC Storm Drain - Airside								
019	Storm Drain Cleanout in Pavement and Grass Areas	6,860.70	0.00	0.00	0.00	0.00	0.00%	6,860.70	0.00
020	6-inch Diameter Schedule 80 PVC Storm Drain - Airside	9,243.00	0.00	0.00	0.00	0.00	0.00%	9,243.00	0.00
021	4-inch Diameter Schedule 80 PVC Storm Drain - Airside	3,082.00	0.00	0.00	0.00	0.00	0.00%	3,082.00	0.00
022	Storm Drainage Manhole	7,324.80	0.00	0.00	0.00	0.00	0.00%	7,324.80	0.00
023	Temporary SIDA Fence	92,373.75	38,792.25	0.00	0.00	38,792.25	41.99%	53,581.50	3,879.23
024	Temporary Construction Fence	25,830.00	33,222.00	0.00	0.00	33,222.00	128.62%	-7,392.00	3,322.20
025	Temporary 24-foot Wide Manual Double Swing Gate	4,200.00	2,100.00	0.00	0.00	2,100.00	50.00%	2,100.00	210.00
026	Remove Chain Link Fence, Any Height	2,142.00	2,184.00	0.00	0.00	2,184.00	101.96%	-42.00	218.40
027	Remove Chain Link Sliding Gate and All Related Appurtenances, Any Size	1,575.00	1,575.00	0.00	0.00	1,575.00	100.00%	0.00	157.50
028	New 8-Ft Chain Link Fence with 3 Strands Barbed Wire-Black Coated	15,356.25	0.00	0.00	0.00	0.00	0.00%	15,356.25	0.00
029	Pavement Marking Removal - Airside - Any Color on Any Pavement	31,570.00	0.00	0.00	0.00	0.00	0.00%	31,570.00	0.00
030	Pavement Marking -	4,112.50		0.00	0.00	0.00	0.00%	4,112.50	

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User Notes:

Α	В	С	D	E	F	G	H		I
			WORK CO	MPLETED	MATERIALS	TOTAL			
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	PRESENTLY STORED (NOT IN D OR E)	COMPLETED AND STORED TO DATE	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
	Reflectorized White								
031	Pavement Marking - Non-Reflectorized White	7,752.00	0.00	0.00	0.00	0.00	0.00%	7,752.00	0.00
032	Pavement Marking - Reflectorized Yellow	6,985.60	0.00	0.00	0.00	0.00	0.00%	6,985.60	0.00
033	Pavement Marking - Non-Reflectorized Yello	361.20	0.00	0.00	0.00	0.00	0.00%	361.20	0.00
034	Pavement Marking - Reflectorized Red	6,960.00	0.00	0.00	0.00	0.00	0.00%	6,960.00	0.00
035	Pavement Marking - Non-Reflectorized Red	484.90	0.00	0.00	0.00	0.00	0.00%	484.90	0.00
036	Pavement Marking - Black	19,216.80	0.00	0.00	0.00	0.00	0.00%	19,216.80	0.00
037	Waterline Demolition & Removal	10,242.80	0.00	0.00	0.00	0.00	0.00%	10,242.80	0.00
038	Misc Demolition	23,679.60	0.00	0.00	0.00	0.00	0.00%	23,679.60	0.00
039	Tree Removal	231,739.20	231,739.20	0.00	0.00	231,739.20	100.00%	0.00	23,173.92
040	Conduit Removal	5,250.00	0.00	0.00	0.00	0.00	0.00%	5,250.00	0.00
041	Embankment in Place - Import Fill - Airside	66,805.00	0.00	0.00	0.00	0.00	0.00%	66,805.00	0.00
042	Unsuitable Excavation - Airside	17,400.00	0.00	0.00	0.00	0.00	0.00%	17,400.00	0.00
043	Stripping Topsoil	58,815.90	62,620.43	0.00		62,620.43	106.47%	-3,804.53	6,262.04
044	Cut to Fill - Landside	13,473.00		0.00	0.00	0.00	0.00%	13,473.00	0.00
045	Import Fill Material	219,810.00	70,597.80	296,872.80	0.00	367,470.60	167.18%	-147,660.60	36,747.06
046	Muck & Fill	66,286.00		0.00	0.00	0.00	0.00%		0.00
047	Fine Grading	181,428.00		0.00	0.00	0.00	0.00%	181,428.00	0.00
048	Storm Drain Grate Inlet	23,868.60	0.00	0.00	0.00	0.00	0.00%	23,868.60	0.00
049	Storm Drain Bubbler Box	91,459.68	0.00	22,864.92	0.00	22,864.92	25.00%	68,594.76	2,286.49
050	Yard Inlet with Domed Grate	41,296.50	0.00	0.00	0.00	0.00	0.00%	41,296.50	0.00

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User Notes:

Α	В	C	D	E	F	G		Н	I
			WORK CO	MPLETED	MATERIALC	TOTAL			
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	MATERIALS PRESENTLY STORED (NOT IN D OR E)	COMPLETED AND STORED TO DATE	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
051	Rip Rap Over Filter Fabric	27,080.00	0.00	0.00	0.00	0.00	0.00%	27,080.00	0.00
052	15" RCP	15,228.18	0.00	0.00			0.00%		0.00
053	18" RCP	32,677.75	0.00	0.00			0.00%		0.00
054	Concrete Flumes	17,360.10	0.00	0.00			0.00%		0.00
055	12" Perforated Underdrain with Stone Trench	55,033.24	0.00	0.00			0.00%		=
056	Core Existing Outlet Box for Underdrain Connection	4,060.35	0.00	0.00	0.00	0.00	0.00%	4,060.35	0.00
057	Roof Drainage Collection System	266,332.50	0.00	0.00	0.00	0.00	0.00%	266,332.50	0.00
058	Bioretention / Bioswale Soil Media Construction	125,703.50	0.00	0.00	0.00	0.00	0.00%	125,703.50	0.00
059	2" Asphalt Surface Course - Landside	227,640.00	0.00	0.00	0.00	0.00	0.00%	227,640.00	0.00
060	8" Aggregate Base Course - Landside	212,730.00	0.00				0.00%		
061	Tack Coat - Landside	10,092.00	0.00	0.00	0.00	0.00	0.00%	10,092.00	0.00
062	Concrete Curb - Landside	66,845.70	0.00	0.00	0.00	0.00	0.00%	66,845.70	0.00
063	Concrete Pavers - Landside	108,023.10	0.00	0.00	0.00	0.00	0.00%	108,023.10	0.00
064	6" Thick Portland Cement Concrete Pavement	292,748.70	0.00	0.00	0.00	0.00	0.00%	292,748.70	0.00
065	6" Thick Portland Cement Concrete Pavement (Reinforced)	127,180.20	0.00	0.00	0.00	0.00	0.00%	127,180.20	0.00
066	8" Thick Portland Cement Concrete Pavement	30,968.30	0.00	0.00	0.00	0.00	0.00%	30,968.30	0.00

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Α	В	С	D	E	F	G		H	I
			WORK CO	MPLETED	MATERIALC	TOTAL			
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	MATERIALS PRESENTLY STORED (NOT IN D OR E)	TOTAL COMPLETED AND STORED TO DATE (D + E + F)	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
	8" Thick Portland								
	Cement Concrete								
067	Pavement (Reinforced)	8,195.50	0.00	0.00	0.00	0.00	0.00%	8,195.50	0.00
	Bituminous Base	160 011 0							
068	Course	469,211.55	0.00	0.00			0.00%		
069	Bituminous Tack	4,485.00	0.00	0.00	0.00	0.00	0.00%	4,485.00	0.00
070	4" Concrete Sidewalk -	77.502.20	0.00	0.00			0.000/		
070	Landside 4" Concrete Sidewalk -	77,523.38	0.00	0.00	0.00	0.00	0.00%	77,523.38	0.00
071	Airside	11 522 50	0.00	0.00	0.00	0.00	0.000/	11 522 50	, , ,
0/1	4" Concrete Pad for	11,522.50	0.00	0.00	0.00	0.00	0.00%	11,522.50	0.00
072	Bike Racks	3,472.00	0.00	0.00	0.00	0.00	0.00%	3,472.00	0.00
012	4" Oyster Shell	3,472.00	0.00	0.00	0.00	0.00	0.0070	3,472.00	0.00
073	Concrete Walkway	58,287.90	0.00	0.00	0.00	0.00	0.00%	58,287.90	0.00
	Internally Pigmented					0.00	0,007,0	50,207.50	0.00
074	Concrete Crosswalks	173,166.00	0.00	0.00	0.00	0.00	0.00%	173,166.00	0.00
075	Concrete Wheelstop	7,969.50	0.00	0.00			0.00%		
076	Handicap Ramps with Detectable Warnings	28,933.54	0.00	0.00	0.00	0.00	0.00%	28,933.54	0.00
	6" Concrete Dumpster								
077	Pad	19,674.95	0.00	0.00	0.00	0.00	0.00%	19,674.95	0.00
078	Wood Dumpster Enclosure	144.90	0.00	0.00	0.00	0.00	0.00%	144.90	0.00
079	Striping, Signage & Marking	22,641.15	0.00	0.00	0.00	0.00	0.00%	22,641.15	0.00
	Tie-in to Existing								
080	Waterline	17,947.65	0.00	0.00	0.00	0.00	0.00%		
081	10" PVC Water Line	56,838.40	0.00	0.00	0.00	0.00	0.00%	56,838.40	0.00
082	6" PVC Water Line	239.40					0.00%		
083	6" PVC Fire Line	11,010.90					0.00%		
084	Free-Standing FDC	16,842.00	0.00			0.00	0.00%	16,842.00	0.00
085	2" Water Lateral	1,536.50	0.00	0.00			0.00%	1,536.50	0.00
086	2.5" Water Lateral	628.32	0.00	0.00	0.00	0.00	0.00%	628.32	0.00

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			WORK CO	MPLETED) (A TERRIAL C	TOTAL			
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	MATERIALS PRESENTLY STORED (NOT IN D OR E)	TOTAL COMPLETED AND STORED TO DATE (D + E + F)	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
087	Fire Hydrants	9,028.92	0.00	0.00	0.00	0.00	0.00%	9,028.92	0.00
088	Valves, Fittings & RPZS	85,335.60	0.00	0.00	0.00	0.00	0.00%	85,335.60	0.00
089	Water Testing	15,252.30	0.00	0.00	0.00	0.00	0.00%	15,252.30	0.00
090	Connect to Existing Sewer Manhole	10,285.80	0.00	0.00			0.00%		
091	Standard Manhole	18,591.30		0.00			0.00%		
092	8" Sewer Line	30,729.46	0.00	0.00	0.00	0.00	0.00%	30,729.46	0.00
093	6" Sewer Lateral with Cleanouts	8,023.00	0.00				0.00%		
094	Sewer Testing	5,909.40	0.00	0.00	0.00	0.00	0.00%	5,909.40	0.00
095	2" Diameter Schedule 80 PVC Conduit	126,549.00	0.00	0.00	0.00	0.00	0.00%	126,549.00	0.00
096	2" Diameter Schedule 80 PVC Conduit Directional Bore	7,442.25	0.00	0.00	0.00	0.00	0.00%	7,442.25	0.00
097	Handhole	5,698.35	0.00		<u> </u>		0.00%		
098	Terminal Renovation & Expansion	0.00	0.00				0.00%		
099	Gate 1 Counter Inserts (Allowance No. 1)	7,000.00	0.00	0.00	0.00	0.00	0.00%	7,000.00	0.00
100	Gate 2 Counter Inserts (Allowance No. 2)	7,000.00	0.00	0.00	0.00	0.00	0.00%	7,000.00	0.00
101	Temporary Signage (Allowance No. 3)	10,000.00	0.00	0.00	0.00	0.00	0.00%	10,000.00	0.00
102	Plan Review, Bldg. Permit, Utility, Tap & Misc Fees (Allowance No. 4)	125,000.00	0.00	0.00	0.00	0.00	0.00%	125,000.00	0.00
103	Soil Testing for Percolation Rates & Composition Adjustment (Allowance	10,000.00	0.00	0.00	0.00	0.00	0.00%		

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	No. 5)								
104	Cost to Move TSA and LEO Offices (Allowance No. 6)	200,000.00	0.00	0.00	0.00	0.00	0.00%	200,000.00	0.00
105	Fine Grading - Landscaping	3,150.00	0.00	0.00	0.00	0.00	0.00%	3,150.00	0.00
106	Soil Amendments - Landscaping	682.50	0.00	0.00	0.00	0.00	0.00%	682.50	0.00
107	Herbicide	367.50	0.00	0.00	0.00	0.00	0.00%	367.50	0.00
108	Landscaping with Required Irrigation System Complete per Plan	69,823.37	0.00	0.00	0.00	0.00	0.00%	69,823.37	0.00
109	SOD, Zoysia Japonica 'Zeon', Korean Grass	9,680.00	0.00	0.00	0.00	0.00	0.00%	9,680.00	0.00
110	Phase 1 - Year 1 Maintenance	2,100.00	0.00	0.00	0.00	0.00	0.00%	2,100.00	0.00
111	Phase 1 - Year 2 Maintenance	2,100.00	0.00	0.00	0.00	0.00	0.00%	2,100.00	0.00
112	Phase 1 - Year 3 Maintenance	2,100.00	0.00	0.00	0.00	0.00	0.00%	2,100.00	0.00
113	Phase 2 - Year 1 Maintenance	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
114	Phase 2 - Year 2 Maintenance	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
115_	Phase 2 - Year 3 Maintenance	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
116	Phase 6 - Year 1 Maintenance	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
117	Phase 6 - Year 2 Maintenance	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
118	Phase 6 - Year 3 Maintenance	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00

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119	Reduced Pressure Principle Backflow Preventer Cover	2,940.00	0.00	0.00	0.00	0.00	0.00%	2,940.00	0.00
120	5-Luminaire LED Apron Floodlight Pole with 50-Ft Mtg Height, Complete	80,000.00	0.00	0.00	0.00	0.00	0.00%	80,000.00	0.00
121	Reinforced Concrete Transformer Pad	10,678.50	0.00	0.00	0.00	0.00	0.00%		
122	Reinforced Concrete Generator Pad	3,150.00		0.00	0.00		0.00%		
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
	Terminal Renovation & Expansion	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
201	Furniture - Allowance	257,638.54	0.00	0.00	0.00	0.00	0.00%	257,638.54	0.00
202	Gate Counter Insert - Allowance	7,000.00	0.00	0.00	0.00	0.00	0.00%	7,000.00	0.00
203	Bonds / Insurance / License	370,000.00					100.00%		37,000.00
204	General Conditions	1,993,000.00		50,000.00			43.39%	1,128,215.07	86,478.49
205	Temporary Construction	284,000.00		60,000.00			21.13%		
206	Scheduling	54,000.00		1,350.00			44.81%	- ,	
207	Selective Demolition	140,000.00		84,000.00			80.00%		
208	Soil Modification	59,000.00	0.00	0.00	0.00	0.00	0.00%	59,000.00	0.00
209	Concrete - General Conditions	129,000.00	0.00	12,000.00	0.00	12,000.00	9.30%	117,000.00	1,200.00
210	Concrete - Foundations	596,000.00	<u></u>	90,000.00	<u> </u>	 	15.10%	 	
211	Concrete - SOG	483,000.00		0.00		 	0.00%		<u> </u>
212	Concrete - SOD	66,000.00		0.00			0.00%		-
213	Concrete - Steps / Ramp	38,000.00		0.00			0.00%		
214	Masonry	167,000.00	0.00	0.00	0.00	0.00	0.00%	167,000.00	0.00
215	Structural Steel - Bonding	30,000.00	30,000.00	0.00	0.00	30,000.00	100.00%	0.00	3,000.00

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216	Structural Steel - Detailing	117,000.00	94,000.00	0.00	0.00	94,000.00	80.34%	23,000.00	9,400.00
217	Structural Steel - Fabricated - Material	1,735,000.00	445,000.00	0.00	0.00	445,000.00	25.65%	1,290,000.00	44,500.00
218	Miscellaneous Iron - Fabricated - Material	83,000.00	0.00	0.00	0.00	0.00	0.00%	83,000.00	0.00
219	Metal Decking - Material	320,000.00		0.00	0.00		0.00%		
220	Steel Erection	919,000.00		0.00	0.00		0.00%		0.00
221	Light Guage Truss	6,000.00		0.00	0.00		0.00%		
222	Non-Ferrous Metals	47,000.00		0.00	0.00		0.00%		
223	Rough Hardware	16,000.00		0.00	0.00		0.00%		
224	Rough Carpentry	42,000.00	0.00	0.00	0.00	0.00	0.00%	42,000.00	0.00
225	PVC Brackets	17,000.00	0.00	0.00	0.00	0.00	0.00%	17,000.00	0.00
226	Casework	351,000.00	0.00	0.00	0.00	0.00	0.00%	351,000.00	0.00
227	Finish Carpentry	69,000.00	0.00	0.00	0.00	0.00	0.00%	69,000.00	0.00
228	Air Barrier	11,000.00	0.00	0.00	0.00	0.00	0.00%	11,000.00	0.00
229	Metal Roofing	1,533,000.00	0.00	0.00	0.00	0.00	0.00%	1,533,000.00	0.00
230	Membrane Roofing	62,000.00	0.00	0.00	0.00	0.00	0.00%	62,000.00	0.00
231	Cement Siding	282,000.00	0.00	0.00	0.00	0.00	0.00%	282,000.00	0.00
232	Sealants / Firestopping	28,000.00	0.00	0.00	0.00	0.00	0.00%	28,000.00	0.00
233	EJ Covers	8,000.00	0.00	0.00	0.00	0.00	0.00%	8,000.00	0.00
234	Hollow Metal Doors	87,000.00	0.00	0.00	0.00	0.00	0.00%	87,000.00	0.00
235	Wood Doors	21,000.00	0.00	0.00	0.00	0.00	0.00%	21,000.00	0.00
236	Coiling Grilles	71,000.00		0.00	0.00	0.00	0.00%		
237	Storefront - Framing - Material	481,000.00				0.00	0.00%		
238	Storefront - Glazing - Material	259,000.00	0.00	0.00	0.00	0.00	0.00%	259,000.00	0.00
239	Frit Graphic	13,000.00	0.00	0.00	0.00	0.00	0.00%	13,000.00	0.00
240	Automatic Doors	35,000.00	0.00	0.00	0.00	0.00	0.00%	35,000.00	0.00
241	Finish Hardware	153,000.00	0.00	0.00	0.00	0.00	0.00%	153,000.00	0.00

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242	Stucco	131,000.00	0.00	0.00	0.00	0.00	0.00%	131,000.00	0.00
243	Drywall - Framing	768,000.00	0.00	0.00	0.00	0.00	0.00%	768,000.00	0.00
244	Drywall - Insulation	43,000.00	0.00	0.00	0.00	0.00	0.00%	43,000.00	0.00
245	Drywall - GWB	473,000.00	0.00	0.00	0.00	0.00	0.00%	473,000.00	0.00
246	Drywall - Finishing	201,000.00	0.00	0.00	0.00	0.00	0.00%	201,000.00	0.00
247	Glass Reinforced Gypsum	158,000.00	0.00	0.00	0.00		0.00%		0.00
248	Ceramic Tile	85,000.00	0.00	0.00			0.00%		0.00
249	Terrazzo	472,000.00	0.00	0.00			0.00%		0.00
250	Acoustical Ceilings	289,000.00	0.00	0.00			0.00%		0.00
251	Resilient Tile / Carpet	104,000.00	0.00	0.00			0.00%		0.00
252	Painting / Coatings	235,000.00	0.00	0.00	1		0.00%		0.00
253	Toilet Partitions	37,000.00	0.00	0.00			0.00%		0.00
254	Corner Guards	2,000.00	0.00	0.00			0.00%		
255	Flagpoles	11,000.00	0.00	0.00			0.00%		
256	Signage	54,000.00	0.00	0.00	0.00	0.00	0.00%	54,000.00	0.00
257	Flight Information Displays	47,000.00	0.00				0.00%	 	0.00
258	Lockers	4,000.00	0.00	0.00	0.00	0.00	0.00%	4,000.00	0.00
259	Fire Protection Specialties	3,000.00	0.00				0.00%		0.00
260	Awnings	4,000.00	0.00	0.00			0.00%		
261	Toilet Accessories	12,000.00	0.00				0.00%	· · · · · · · · · · · · · · · · · · ·	0.00
262	Rooftop Screens	48,000.00	0.00				0.00%		0.00
263	Maintenance Equipment	39,000.00	0.00	0.00	0.00	0.00	0.00%	39,000.00	0.00
264	Audio Visual Equipment	30,000.00	0.00	0.00	0.00	0.00	0.00%	30,000.00	0.00
265	Pedestrian Controls	112,000.00	0.00		0.00	0.00	0.00%	112,000.00	0.00
266	Kitchen Appliances	2,000.00	0.00	0.00	0.00	0.00	0.00%	2,000.00	0.00
267	Gate Equipment - Alternate 1A	1,402,000.00	0.00	0.00	0.00	0.00	0.00%	1,402,000.00	0.00
268	Gate Equipment -	1,414,000.00	- 0.00	42,974.00	0.00	42,974.00	3.04%	1,371,026.00	4,297.40

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ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	MATERIALS PRESENTLY STORED (NOT IN D OR E)	TOTAL COMPLETED AND STORED TO DATE (D + E + F)	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
	Alternate 1B (Allowance)								
269	Fire Protection - Design	15,000.00	3,000.00	0.00	0.00	3,000.00	20.00%	12,000.00	300.00
270	Fire Protection	332,000.00	0.00	0.00	0.00	0.00	0.00%		
271	Plumbing - Underground - Material	25,000.00	0.00	0.00	0.00	0.00	0.00%	25,000.00	0.00
272	Plumbing - Underground - Labor	54,000.00	0.00	0.00	0.00	0.00	0.00%	54,000.00	0.00
273	Plumbing - Drain, Waste, Vent - Material	40,000.00	0.00	0.00	0.00	0.00	0.00%	40,000.00	0.00
274	Plumbing - Water - Material	58,000.00	0.00	0.00	0.00	0.00	0.00%	58,000.00	0.00
275	Plumbing - Wall Rough - Labor	254,000.00		0.00			0.00%		
276	Plumbing - Insulation	38,000.00	0.00	0.00	0.00	0.00	0.00%	38,000.00	0.00
277	Plumbing - Fixtures - Material	33,000.00	0.00	0.00	0.00	0.00	0.00%	33,000.00	0.00
278	Plumbing - Fixtures - Labor	23,000.00	0.00	0.00	0.00	0.00	0.00%	23,000.00	0.00
279	HVAC - General Conditions	435,000.00	10,000.00	15,000.00	0.00	25,000.00	5.75%	410,000.00	2,500.00
280	HVAC - Split System - Material	267,000.00	0.00	0.00	243,000.00	243,000.00	91.01%	24,000.00	24,300.00
281	HVAC - Split System - Labor	41,000.00	0.00	0.00	0.00	0.00	0.00%	41,000.00	0.00
282	HVAC - High Volume Low Speed Exhaust Fans - Material	42,000.00	0.00	0.00	0.00	0.00	0.00%	42,000.00	0.00
283	HVAC - High Volume Low Speed Exhaust Fans - Labor	19,000.00	0.00	0.00	0.00	0.00	0.00%	19,000.00	0.00
284	HVAC - Wall Heaters	17,000.00					0.00%		
285	HVAC - Exhaust Fans	14,000.00					0.00%		

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User Notes:

A	В	C	D	E	=F	G		Н	I
			WORK CO	MPLETED	MATERIALC	TOTAL		-	
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	MATERIALS PRESENTLY STORED (NOT IN D OR E)	TOTAL COMPLETED AND STORED TO DATE (D + E + F)	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
286	HVAC - Distribution - Material	51,000.00	0.00	0.00	0.00	0.00	0.00%	51,000.00	0.00
287	HVAC - Distribution - Labor	12,000.00	0.00	0.00	0.00	0.00	0.00%	12,000.00	0.00
288	HVAC - Louvers	23,000.00	0.00	0.00	0.00	0.00	0.00%	23,000.00	0.00
289	HVAC - Vibration Isolation	40,000.00	0.00	0.00	35,000.00	35,000.00	87.50%	5,000.00	3,500.00
290	HVAC - Piping - Material	135,000.00	0.00	0.00			0.00%		
291	HVAC - Piping - Labor	179,000.00	0.00	0.00	0.00	0.00	0.00%	179,000.00	0.00
292	HVAC - Ductwork - Material	116,000.00	0.00	0.00	0.00	0.00	0.00%	116,000.00	0.00
293	HVAC - Ductwork - Labor	103,000.00	0.00	0.00	0.00	0.00	0.00%	103,000.00	0.00
294	HVAC - Insulation	105,000.00	0.00	0.00	0.00	0.00	0.00%	105,000.00	0.00
295	HVAC - Test, Adjust, Balancing	13,000.00	0.00	0.00	0.00	0.00	0.00%	13,000.00	0.00
296	HVAC - Startup	13,000.00	0.00	0.00	0.00	0.00	0.00%		
297	HVAC - Controls	168,000.00	0.00	0.00	0.00	0.00	0.00%		
298	Electrical - Bonding	52,000.00	52,000.00	0.00	0.00	52,000.00	100.00%		5,200.00
299	Electrical - Demolition	38,000.00	22,800.00	0.00	0.00		60.00%		2,280.00
300	Electrical - SOG - Rough	375,000.00	0.00				0.00%		
301	Electrical - Wall / OH - Rough	820,000.00	0.00	0.00	0.00	0.00	0.00%	820,000.00	0.00
302	Electrical - Fixtures - Material	825,000.00	0.00	0.00	0.00	0.00	0.00%	825,000.00	0.00
303	Electrical - Switch Gear - Material	225,000.00	0.00	0.00	0.00	0.00	0.00%	225,000.00	0.00
304	Electrical - Generator - Material	623,000.00	···	0.00	0.00	0.00	0.00%	623,000.00	0.00
305	Electrical - Site Lighting						0.00%		
306	Electrical - Raceways	495,000.00	0.00	0.00	0.00	0.00	0.00%	495,000.00	0.00

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User Notes:

Α	В	С	D	E	F	G		Н	I
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	WORK CO FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	MATERIALS PRESENTLY STORED (NOT IN D OR E)	TOTAL COMPLETED AND STORED TO DATE (D + E + F)	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
307	Electrical - Wiring	165,000.00	0.00	0.00	0.00	0.00	0.00%	165,000.00	0.00
308	Electrical - Trim	548,000.00	0.00	0.00	0.00	0.00	0.00%	548,000.00	0.00
309	Cabling	182,000.00	0.00	0.00	0.00	0.00	0.00%	182,000.00	0.00
	Access Control / Intrusion / Variable	475 000 00	250 102 00	0.00	0.00	259 192 00	54.250/	216 919 00	25 010 20
	Message Signs	475,000.00					54.35%		
311	Fire Alarm	71,000.00							
		0.00		0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
	GRAND TOTAL	\$30,898,447.83	\$2,792,908.90	\$679,327.57	\$278,000.00	\$3,750,236.47	12.14%	\$27,148,211.36	\$375,023.65

PAY REQUEST MARKUP SHEET TERMINAL IMPROVEMENTS-PHASE 1-BASE BID

\$0.00		\$4,112.50	\$6.58	SF	625	REFLECTORIZED WHITE	30
\$0.00		\$31,570.00	\$7.00	SH	4,510	PAVEMENT MARKING REMOVAL- AIRSIDEANY COLOR ON ANY PAVEMENT	29
\$0.00		\$15,356.25	\$47.25	Fi .	325	NEW 8-FT CHAIN LINK FENCE WITH 3 STRANDS BARBED WIRE BLACK COATED	28
\$0.00		\$1,575.00	\$1,575.00	EI A	_	REMOVE CHAIN LINK SLIDING GATE AND ALL RELATED APPURTENANCES, ANY SIZE	27
\$0.00		\$2,142.00	\$4.20	뉴	510	REMOVE CHAIN LINK FENCE, ANY HEIGHT	26
\$0.00		\$4,200.00	\$2,100.00	E	2	MANUAL DOUBLE SWING GATE	25
\$0.00		\$25,830.00	\$42.00	F	615	TEMPORARY CONSTRUCTION FENCE	24
\$0.00		\$92,373.75	\$47.25	LF	1,955	TEMPORARY SIDA FENCE	23
\$0.00		\$7,324.80	\$7,324.80	EA	>	STORM DRAINAGE MANHOLE	22
\$0.00		\$3,082.00	\$61.64	ᄕ	50	4-INCH DIAMETER SCHEDULE 80 PVC STORM DRAIN-AIRSIDE	21
\$0.00		\$9,243.00	\$61.62	두	150.0	6-INCH DIAMETER SCHEDULE 80 PVC STORM DRAIN-AIRSIDE	20
\$0.00		\$6,860.70	\$2,286.90	EA	3.0	STORM DRAIN CLEANOUT IN PAVEMENT AND GRASS AREAS	19
\$0.00		\$70,052.25	\$150.65	5	465	12-INCH DIAMETER SCHEDULE 80 PVC STORM DRAIN-AIRSIDE	18
\$0.00		\$507.15	\$507.15	ĒΑ	_	REMOVE PIPE BOLLARD	17
\$0.00		\$10,662.75	\$33.85	YS	315	CONCRETE PAVEMENT REMOVAL-AIRSIDE, ANY THICKNESS	16
\$0.00		\$48,266.40	\$53.04	SY	910	CONCRETE REMOVAL- LANDSIDE AND AIRSIDE	15
\$0.00		\$4,578.40	\$57.23	SY	80	ASPHALT PAVEMENT REMOVAL- AIRSIDE, ANY THICKNESS	14
\$0.00		\$64,032.00	\$11.04	YS	5,800	ASPHALT REMOVAL	13
\$0.00		\$29,865.60	\$87.84	ΥS	340	1.5" THICK ASPHALT MILLING	12
\$841.05	3.00	\$1,121.40	\$280.35	ΕA	4	SEDIMENT TUBES	11
\$0.00		\$76,256.25	\$36.75	<u> </u>	2,075	TEMPORARY FENCE AROUND BIORETENTION SWALE	10
\$0.00		\$5,926.20	\$348.60	ΕA	17.0	INLET PROTECTION	9
\$0.00		\$3,458.70	\$1,729.35	ΕA	2	ROCK CHECK DAMS	8
\$0.00		\$8,452.50	\$8,452.50	LS	1	SEEDING	7
\$1,428.00	1.00	\$1,428.00	\$1,428.00	<u> </u>	4,000	CONCRETE WASHOUT	o (
\$1,996.80	208.00	\$12,672.00	\$9.60	<u> </u>	1,320	SILT FENCE	4
\$0.00		\$15,229.20	\$15,229.20	LS	1	CONSTRUCTION ENTRANCE	3
\$0.00		\$25,000.00	\$25,000.00	LS	1	CONTRACTOR QUALITY CONTROL PROGRAM	2
\$0.00		\$355,962.60	\$355,962.60	LS	-	MOBILIZATION	1
(0)	5	(0)	(c)	(4)	(3)	D SCORE OF WORK	BASE BII
(8)	Units	Amount	Price		9)	
Amount Earned	No. of	Contract	Unit	Unit	Quantity	Detailed Estimate	Item No.
one This Period	Work Done		Contract			and Description of Unit	No.
		PORT	HILTON HEAD ISLAND AIRPORT	ON HEA	HILT		

		HILI	ON HE	HILTON HEAD ISLAND AIRPORT	RPORT	1	
	and Description of Unit			Contract		Work Do	Done This Period
No.	Detailed Estimate	Quantity	Unit	Unit	Contract	No. of	Amount Earned
3	(2)	ω	(4)	Price (5)	Amount (6)	Units (7)	(8)
31	PAVEMENT MARKING-NON- REFLECTORIZED WHITE	1,360	SE	\$5.70	\$7,752.00		
32	PAVEMENT MARKING- REFLECTORIZED YELLOW	1.180	SF	\$ 5.92	\$6,985.60		
33	PAVEMENT MARKING-NON- REFLECTORIZED YELLOW	40	SE	\$9.03	\$361.20		
34	PAVEMENT MARKING- REFLECTORIZED RED	1,200	SH	\$ 5.80	\$6,960.00		
<u>ა</u>	PAVEMENT MARKING-NON REFLECTORIZED RED	65	E P	\$7.46	\$484.90		
36	PAVEMENT MARKING-BLACK	4,080	SF	\$4.71	\$19,216.80		
37	WATERLINE DEMOLITION & REMOVAL	580	F	\$17.66	\$10,242.80		
38	MISC. DEMOLITION		LS	\$23,679.60	\$23,679.60		
39	TREE REMOVAL	132	EA	\$1,755.60	\$231,739.20		
40	CONDUIT REMOVAL	1	SJ	\$5,250.00	\$5,250.00		
41	IMPORT FILL-AIRSIDE	1,550	СҮ	\$43.10	\$66,805.00		
42	UNSUITABLE EXCAVATION- AIRSIDE	500	СҮ	\$34.80	\$17,400.00		
43	STRIPPING TOPSOIL	1,430	СХ	\$41.13	\$58,815.90		
44	CUT TO FILL-LANDSIDE	900	СҮ	\$14.97	\$13,473.00		
45	IMPORT FILL MATERIAL	5,100	22	\$43.10	\$219,810.00	6,888.00	\$296,872.80
47	FINE GRADING	15.600	YS	\$11.63	\$181,428.00		
48	STORM DRAIN GRATE INLET	4	EA	\$5,967.15	\$23,868.60		
49	STORM DRAIN BUBBLER BOX	12	EA	\$7,621.64	\$91,459.68	3.00	
50	YARD INLET WITH DOMED GRATE	9	E A	\$4,588.50	\$41,296.50		
51	RIP RAP OVER FILTER FABRIC	160	YS	\$169.25	\$27,080.00		
52	15" RCP	198	ᄕ	\$76.91	\$15,228.18		
53	18" RCP	355	ᄕ	\$92.05	\$32,677.75		
g 2	CONCRETE FLUMES	5	EA	\$3,472.02	\$17,360.10		
55	WITH STONE TRENCH	401	FF	\$137.24	\$55,033.24		
56	CORE EXISTING OUTLET BOX FOR UNDERDRAIN	_	EΑ	\$4,060.35	\$4,060.35		
57	ROOF DRAINAGE COLLECTION SYSTEM	1	LS	\$266,332.50	\$266,332.50		
58	BIORETENTION/BIOSWALE SOIL MEDIA CONSTRUCTION	415	СҮ	\$302.90	\$125,703.50		
59	2" ASPHALT SURFACE COURSE- LANDSIDE	4,200	YS	\$54.20	\$227,640.00		
60	8" AGGREGATE BASE COURSE- LANDSIDE	4,200	YS	\$50.65	\$212,730.00		
61	TACK COAT-LANDSIDE	300	GAL	\$33.64	\$10,092.00		
62	CONCRETE CURB-LANDSIDE	1,530	LF	\$43.69	\$66,845.70		
63	CONCRETE PAVERS-LANDSIDE	510	LF	\$211.81	\$108,023.10		
64	6-INCH THICK PORTLAND CEMENT CONCRETE	1,285	ΥS	\$227.82	\$292,748.70		
	OCHOCKE I	1,200	0	10:1110	\$1000, 1000 O		

\$0.00		\$0,080.00	\$1,099.40	ĘĄ	ن		37
\$0.00		\$7,442.25	\$99.23	1 5	/5	מכאות	2
3				1		2-INCH DIAMETER SCHEDULE 80 PVC CONDUIT DIRECTIONAL	96
\$0.00		\$126,549.00	\$46.87	듀	2,700	2-INCH DIAMETER SCHEDULE 80 PVC CONDUIT	95
\$0.00		\$5,909.40	\$5,909.40	LS	1	SEWER TESTING	94
\$0.00		\$8,023.00	\$80.23	듀	100	6" SEWER LATERAL WITH CLEANOUTS	93
\$0.00	The same	\$30,729.46	\$79.61	두	386	8" SEWER LINE	92
\$0.00		\$18,591.30	\$6,197.10	ĒΑ	w	STANDARD MANHOLE	91
\$0.00		\$10,285.80	\$10,285.80	ΕA	<u> -</u>	CONNECT TO EXISTING SEWER MANHOLE	90
\$0.00		\$15,252.30	\$15,252.30	LS	1	WATER TESTING	89
\$0.00		\$85,335.60	\$85,335.60	LS	1	VALVES, FITTINGS, & RPZS	88
\$0.00		\$9,028.92	\$9,028.92	E :		FIRE HYDRANTS	87
\$0.00		\$628.32	\$28.56	- 5	23 70	2.5" WATER LATERAL	86
\$0.00		\$16,842.00	\$16,842.00	EA	70 1	PREE-STANDING FUC	20, 00,
\$0.00		\$11,010.90	\$43.18	두	255	6" PVC FIRE LINE	83
\$0.00		\$239.40	\$39.90	두	0	6" PVC WATER LINE	82
\$0.00		\$56,838.40	\$88.81	뜌	640	10" PVC WATER LINE	81
\$0.00		\$17,947.65	\$17,947.65	LS	1	TIE-IN TO EXISTING WATERLINE	80
\$0.00		\$22,641.15	\$22,641.15	LS	1	STRIPING, SIGNAGE, & MARKING	79
\$0.00		\$144.90	\$144.90	EA	1	WOOD DUMPSTER ENCLOSURE	78
\$0.00	Nation III	\$19,674.95	\$231.47	SY	85	6" CONCRETE DUMPSTER PAD	77
\$0.00		\$28,933.54	\$28,933.54	LS	1	HANDICAP RAMPS WITH DETECTABLE WARNINGS	76
\$0.00		\$7,969.50	\$144.90	ΕA	55	CONCRETE WHEELSTOP	75
\$0.00		\$173,166.00	\$364.56	YS	475	INTERNALLY PIGMENTED CONCRETE CROSSWALKS	74
\$0.00		\$58,287.90	\$114.29	SY	510	4" OYSTER SHELL CONCRETE WALKWAY	73
\$0.00		\$3,472.00	\$173.60	YS	20	4" CONCRETE PAD FOR BIKE RACKS	72
\$0.00		\$11,522.50	\$92.18	SY	125	4" CONCRETE SIDEWALK- AIRSIDE	71
\$0.00		\$77,523.38	\$92.18	SY	841	4" CONCRETE SIDEWALK- LANDSIDE	70
\$0.00		\$4,485.00	\$14.95	GAL	300	BITUMINOUS TACK	69
\$0.00		\$469,211.55	\$561.93	TON	835	BITUMINOUS BASE COURSE	68
\$0.00		\$8,195.50	\$327.82	YS	25	8-INCH THICK PORTLAND CEMENT CONCRETE PAVEMENT (REINFORCED)	67
\$0.00		\$30,968.30	\$281.53	YS	110	8-INCH THICK PORTLAND CEMENT CONCRETE	66
\$0.00		\$127,180.20	\$237.72	YS	535	6-INCH THICK PORTLAND CEMENT CONCRETE PAVEMENT (REINFORCED)	65
(8)	(7)	Amount (6)	(5)	(4)	(3)	(2)	(1)
Amount Earned	No. of	Contract	Unit	Unit	Quantity	Detailed Estimate	No.
Done Inis Period	WORK DO		Contract			and Description of Unit	- 1
	-	PORT	HILTON HEAD ISLAND AIRPORT	ON HEA	HILL		

\$0.00		\$10,678.50	\$10,678.50	EA	_	TRANSFORMER PAD	121
\$0.00		\$80,000.00	\$40,000.00	ΕA	2	5-LUMINAIRE LED APRON FLOODLIGHT POLE WITH 50-FT MOUNTING HEIGHT, COMPLETE	120
\$0.00		\$2,940.00	\$2,940.00	ΕA	1	REDUCED PRESSURE PRINCIPLE BACKFLOW PREVENTER COVER	119
\$0.00		\$0.00	\$0.00	LS	1	PHASE 6 - YEAR 3 MAINTENANCE	118
\$0.00		\$0.00	\$0.00	SJ	1	PHASE 6 - YEAR 2 MAINTENANCE	117
\$0.00		\$0.00	\$0.00	LS	1	PHASE 6 - YEAR 1 MAINTENANCE	116
\$0.00		\$0.00	\$0.00	LS	1	PHASE 2 - YEAR 3 MAINTENANCE	115
\$0.00		\$0.00	\$0.00	LS	1	PHASE 2 - YEAR 2 MAINTENANCE	114
\$0.00		\$0.00	\$0.00	LS	_	PHASE 2 - YEAR 1 MAINTENANCE	113
\$0.00		\$2,100.00	\$2,100.00	LS	1	PHASE 1 - YEAR 3 MAINTENANCE	112
\$0.00		\$2,100.00	\$2,100.00	LS		PHASE 1 - YEAR 2 MAINTENANCE	111
\$0.00		\$2,100.00	\$2,100.00	LS	-	PHASE 1 - YEAR 1 MAINTENANCE	110
\$0.00		\$9,680.00	\$1.21	SF	8,000	SOD, ZOYSIA JAPONICA 'ZEON', KOREAN GRASS	109
\$0.00		\$69,823.37	\$69,823.37	LS	1	LANDSCAPING WITH REQUIRED IRRIGATION SYSTEM COMPLETE PER PLAN	108
\$0.00		\$367.50	\$367.50	LS	1	HERBICIDE	107
\$0.00		\$682.50	\$682.50	LS	_	SOIL AMENDMENTS- LANDSCAPING	106
\$0.00		\$3,150.00	\$3,150.00	LS		FINE GRADING-LANDSCAPING	105
\$0.00		\$200,000.00	\$200,000.00	ALLOW	1	OFFICES (ALLOWANCE NO. 6)	104
\$0.00		\$10,000.00	\$10,000.00	ALLOW	1	SOIL TESTING FOR PERCOLATION RATES AND COMPOSITION ADJUSTMENT (ALLOWANCE NO. 5)	103
\$0.00		\$125,000.00	\$125,000.00	ALLOW	1	PLAN REVIEW, BUILDING PERMIT, UTILITY TAP AND MISC. FEES (ALLOWANCE NO. 4)	102
\$0.00		\$10,000.00	\$10,000.00	ALLOW	1	TEMPORARY SIGNAGE (ALLOWANCE NO. 3)	101
\$0.00		\$7,000.00	\$7,000.00	ALLOW	1	(ALLOWANCE NO. 2)	100
\$0.00		\$7,000.00	\$7,000.00	ALLOW	1	GATE 1 COUNTER INSERTS (ALLOWANCE NO. 1)	99
\$0.00		\$21,642,000.00	\$21,642,000.00	SJ.	_	TERMINAL RENOVATION AND EXPANSION AS DEPICTED IN THE CONTRACT DOCUMENTS TO INCLUDE ALL CONTRACT ITEMS NOT INDICATED ELSEWHERE ON THE BID FORM	98
(8)	(7)	(6)	(5)	(4)	(3)	(2)	(1)
Amount Earned	No. of	Contract	Unit	Unit	Quantity	Detailed Estimate	No.
one This Period	Work Done		Contract			and Description of Unit	

Page 5 of 6

		+ - 4	4 - 1	!!			
\$0.00		\$3.150.00	\$3.150.00	E A		GENERATOR PAD	
						REINFORCED CONCRETE	122
(8)	(7)	(6)	(5)	(4)	(3)	(2)	(1)
	Units	Amount	Price				
Amount Earned	No. of	Contract	Unit	Unit	Quantity	Detailed Estimate	N _o
							Item
Work Done This Period	Work Do		Contract	1		No. and Description of Unit	No.

Base Bid Total \$27,196,809.29

\$324,003.57

No. a	No. and Description of Unit	At and		Contract		Work Do	ork Done This Period
Item							
No.	Detailed Estimate	Quantity	Unit	Unit	Contract	No. of	Amount Earned
				Price	Amount	Units	
3	(2)	(3)	(4)	(5)	(6)	(7)	(8)
	(=)						

Ediso	Nicho			7	6	5	4	ω	2		AI TER
Edison Foard Representative Signature	Nicholas Roberts William Most	W / W		BID ALTERNATE NO. 11 - 2- LUMINAIRE LED APRON FLOODLIGHT POLE WITH 45-FT MOUNTING HEIGHT, COMPLETE	BID ALTERNATE NO. 10 - 1- LUMINAIRE LED APRON FLOODLIGHT POLE WITH 45-FT MOUNTING HEIGHT, COMPLETE	BID ALTERNATE NO. 9 - GATE COUNTER INSERTS TO INCLUDE \$7,000 ALLOWANCE	BID ALTERNATE NO. 7 - HOLDROOM UPFIT	BID ALTERNATE NO. 2 - FURNITURE ALLOWANCE	BID ALTERNATE NO. 1B - GATE 2 AIRCRAFT GATE EQUIPMENT TO INCLUDE 2A \$35,000 SPARE PARTS ALLOWANCE	BID ALTERNATE NO. 1A - GATE 1 AIRCRAFT GATE EQUIPMENT TO INCLUDE 2A \$35,000 SPARE PARTS ALLOWANCE	ALTERNATE BID SCOPE OF WORK
O	V				1		_	1	1	_	
		10.	Alte	LS.	LS	LS	LS	ALLOW	LS	LS	
		TOTAL AMOUNT	Alternate Bid Total	\$76,000.00	\$76,000.00	\$7,000.00	\$469,000.00	\$257,638.54	\$1,414,000.00	\$1,402,000.00	
TBE RPR Signature	Tom Mullen	\$30,898,447.83	\$3,701,638.54	\$76,000.00	\$76,000.00	\$7,000.00	\$469,000.00	\$257,638.54	\$1,414,000.00	\$1,402,000.00	
Ф	Thomas										
	nomas A Mullen	\$324,003.57	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	

PAY REQUEST NUMBER:

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PERIOD ENDING:

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

MCGriff Insurance Services LLC Post Office Box 13941 Durham, NC 27709			Charter Oak Fire Insurance Company One Tower Square Hartford, CT 06183	ere 183	e Company		
FAX (A/C, No): 8887468761 E-MAIL ADDRESS: bpendleton@mcgriff.com				IF N	IULTIPLE COMP	ANIES, COMPLI	MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH
			POLICY TYPE	5 1m			
AGENCY CUSTOMER ID #: 1690319			INSTALL	, I CN			
NAMED INSURED AND ADDRESS Superior Mechanical Systems Inc			LOAN NUMBER	SER.			QT6600L729358COF22
600 Atando Ave Charlotte, NC 28206-1914			EFFECTIVE DATE	DATE	EXPI	EXPIRATION DATE	
			06/30/2023	023		06/30/2024	CONTINUED UNTIL TERMINATED IF CHECKED
ADDITIONAL NAMED INSURED(S)			THIS REPLA	CES PR	THIS REPLACES PRIOR EVIDENCE DATED:	DATED:	
		L					
PROPERTY INFORMATION (ACORD 101 may be attached if more space LOCATION/DESCRIPTION	space	S.	required)		BUILDING OR	BUSINESS	S PERSONAL PROPERTY
LOCATION DESCRIPTION							
THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD I ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS EVIDENCIBE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TER	THE IN	SUR	ED NAMED INT WITH R	ABOV ESPEC	E FOR THE P	OLICY PERIOD THIS EVIDEN	DINDICATED. NOTWITHSTANDING CE OF PROPERTY INSURANCE MAY RMS, EXCLUSIONS AND CONDITIONS
COVERAGE INFORMATION PERILS INSURED	BASIC		BROAD	×	SPECIAL		
COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: \$							DED:
	YES NO	N/A					
BOSINESS INCOME RENIAL VALUE	+	×	IT YES, LIMIT:	. =		L	Actual Loss Sustained; # of months
		>	וו ובס, ווועומ	PA AIP	II TES, Ilidicale value(s) reported	on property roe	on properly identified above. a
TERRORISM COVERAGE		×	Attach Disc	osure	Attach Disclosure Notice / DEC		
IS THERE A TERRORISM-SPECIFIC EXCLUSION?		×					
IS DOMESTIC TERRORISM EXCLUDED?		×					
LIMITED FUNGUS COVERAGE		×	If YES, LIMIT:	Ŧ			DED:
FUNGUS EXCLUSION (IF "YES", specify organization's form used)	_	×					
REPLACEMENT COST	×						
AGREED VALUE	×						
COINSURANCE	×		If YES,		%		
EQUIPMENT BREAKDOWN (If Applicable)		×	If YES, LIMIT:	7.			DED:
ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg	×		If YES, LIMIT:	∄			DED:
- Demolition Costs	×		If YES, LIMIT:	Ε.			DED:
- Incr. Cost of Construction	×		If YES, LIMIT:	∃			DED:
EARTH MOVEMENT (If Applicable)	×		If YES, LIMIT:	T: 1,0	1,000,000		DED: 25,000
FLOOD (if Applicable)	×		If YES, LIMIT:		1,000,000		DED: 25,000
WIND/HAIL INCL YES NO Subject to Different Provisions	×		If YES, LIMIT:	Π:	20		DED:
NAMED STORM INCL YES NO Subject to Different Provisions	×		If YES, LIMIT:	Ξ			DED:
PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS							

CANCELLATION
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
ADDITIONAL INTEREST BEFORE HE **EXPIRATION DATE** THEREOF, NOTICE WILL BE

AUTHORIZED REPRESENTATIVE					
					Т
		219	C 282	Charlotte, NC 28219	
			8	PO Box 19888	
		LC	rd, LL	Edison Foa	
				NAME AND ADDRESS	7
		X Certificate Holder	×	MORTGAGEE	
LENDER SERVICING AGENT NAME AND ADDRESS	LOSS PAYEE	LENDER'S LOSS PAYABLE		CONTRACT OF SALE	

S 684179

81

INSTALLATION LIMITS

At each Job Site Location: \$1,000,000

At each Off-Site Fabrication Location: \$500,000

At each Temporary Storage Location: \$500,000 At All Covered Locations Combined: \$1,000,000

In Transit: \$500,000

Coverage Limit of Insurance

Limit of Insurance \$1,000,000. Deductible: \$1,000.

Earth Movement \$1,000,000. Deductible: \$25,000.

Earth Movement Annual Aggregate \$1,000,000. Flood \$1,000,000. Deductible: \$25,000.

Flood Annual Aggregate \$1,000,000.

Windstorm Included \$1,000.

Maximum Amount of Payment \$1,000,000

Temporary Storage \$500,000.

Transit \$500,000.

Earth Movement Annual Aggregate For All Job Sites \$1,000,000

Flood Annual Aggregate For All Job Sites \$1,000,000.

Ordinance or Law Up to \$250,000.

Special Conditions

No Flood Coverage for Flood Zone A, B, D, V, X500, X (Shaded) or XFUT

*** Builders Risk Coverage ***

Open Reporting Coverage Any One Location: Limit: 1,000,000

Windstorm and basic Deductible: 1,000

Earth Movement Limit: 1,000,000 Deductible: 25,000

Flood Limit: 1,000,000 Deductible: 25,000

*** Builders Risk Coverage ***

Open Reporting Coverage Any One Location: Limit: 1,000,000

Windstorm and basic

Deductible: 1,000

Earth Movement Deductible Limit# 2: aggregtae

Limit: 1,000,000 Deductible: 25,000

2nd Limit: 1,000,000

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Limit: 1,000,000 Deductible: 25,000

2nd Limit: 1,000,000

Cause of Loss: Special Deductible: 1,000

Cause of Loss: Earthquake Amount: 1,000,000 Deductible: 25,000

Cause of Loss: Flood Amount: 1,000,000 Deductible: 25,000

****** Description of Operations ******

Project: 23-2932-Hilton Head Island Terminal Improvement Phase 1, 120 Beach City Rd, Hilton Head, SC 29926 Materials Stored At: Superior Mechanical Systems, Inc. Annex Warehouse, 600 Atando Ave, Charlotte, NC

28206

-Split System Material \$220,000.00

S 684179

-Split System Material \$23,000.00
-Vibration Isolation \$35,000.00
Owner-Beaufort County, PO Drawer 1228, Beaufort, SC 29901
Architect-The Wilson Group Architects, 2113 Commonwealth Ave, Charlotte, NC 28205

ACORD 28 (2016/03)

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Page 3 of 3

KTA



PACKING LIST

Page: 1 of 2

Print Date: 06-FEB-2024 01:23 A

Ship To
SUPERIOR MECHANICAL SYSTEMS SU
ATANDO AVE
ATTN BEN WYKE
CHARLOTTE, NC 28206
UNI

Ship From
BRIDGETON NDC WAREHOUSE
ORG
6001 Premier Pkwy
SAINT PETERS, MO 63376

Bill To
SUPERIOR MECHANICAL SYSTEMS
600 ATANDO AVENUE
CHARLOTTE, NC 28206
UNITED STATES

		2401304K3V, 240130543V, 2401306T3V	TEM4B0C60S51SA Serial Number:	Serial Number:	Serial Number: 2350373M5F 2350272	24051UUF5F	23481K6CHF, 24041YT4HF 23481K6CHF, 23481K9SHF, 23481T4PHF, 235016EEHF, 235016FXHF, 24041YGTHF, 24041YHNHF	23434375RHF, 234342XPHF, 2343437FHF, 23452UETHF, 23452UGGLLF	4TWA4060A4000A Serial Number:	Shipping Information Cust PO# Trip# Delivery# Ship Method RBTW-TL-Pc Item
	AIR HANDLER ASM		AIR HANDLER ASM	2.51 SPL HEAT PUMP 1PHS	TO STUHEAT PUMP 1PHS	201 651	PUMP SPL HEAT	, TI	Description	On Hilton Head 36245007 1199558286 RBTW-TL-PCMILER_PRACTICAL_POSTAL
Total	25.67 X 26.00 X 58.18 IN(LXWXH)	(HVAAVA)	25.50 X 20.60 X 47.40	33.00 X 30.00 X 35.00 IN(LXWXH)	33.00 X 30.00 X 39.00 IN(LXWXH)		38.00 X 35.00 X 51.00 IN(LXWXH)	100	Dimension	
37.00	16.00	2.00	2.00	3 3	100		16.00	Quantity		
8986.00	2960.00	252,00	382.00	208.00			5184.00	Extended Weight		
			•							





PACKING LIST

Page: 2 of 2

Print Date: 06-FEB-2024 01:23 A

8986.00	37.00	Total		
			3	2402132N3V, 2402132X3V, 240215JH3V, 24022H513V, 240354P53V
2960.00	16.00	25.67 X 26.00 X 58.18 IN(LXWXH)	AIR HANDLER ASM	2401307C3V, 2401308E3V, 2401308E3V, 240131BH3V, 24013WR93V, 24013YEP3V, 24013YLL3V, 2402132K3V,
				TEM4B0C60S51SA Serial Number: 2401304K3V, 240130543V, 2401306T3V,
252.00	2.00	25.50 X 20.60 X 47.40 IN(LXWXH)	AIR HANDLER ASM	TEM4A0B31M31SB Serial Number: 24012L6P3V, 24013JR53V
382.00	2.00	33.00 X 30.00 X 35.00 IN(LXVVXH)	2.5T SPL HEAT PUMP 1PHS	4TWR4030N1000A Serial Number: 2350373M5F, 2350378D5F
208.00	1.00	33.00 X 30.00 X 39.00 IN(LXVVXH)	1PHS	4TWR4024N1000A Serial Number: 24051UUF5F
5184.00	16,00	38.00 X 35.00 X 51.00 IN(LXWXH)	460V 5,0T 3PH SPL HEAT PUMP	4 IVWA4060A4000A Serial Number: 2343423FHF, 234342XPHF, 2343437FHF, 2343475RHF, 23434J1YHF, 23452UETHF, 23452UGGHF, 24041X0KHF, 24041YT4HF,23481K6CHF, 23481K9SHF, 23481T4PHF, 235016EEHF, 235016FXHF, 24041YGTHF, 24041YHNHF
Extended Weight	Summary Quantity	Dimension	Description	Item
		SADV	0117	

EMECH

Signature

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SUBJECT TO TERMS AND CONDITIONS HEREIN, AND TARIFF CNWY-199 IN EFFECT ON DATE OF SHIPMENT.	l D		CHILD PRO #'s: 1524-030384 OTHER REFERENCE NUMBS **** HAZMAT EMERGENCY CO 18X18X18INADDITIONAL PRO 630-226-6488		HM PCS DESCRIPTION	SHIPPER NUMBERS PO# P/025058	600 ATANDO AVE CHARLOTTE, NC US 28206-1914	CONSIGNEE SUPERIOR MECHANICAL SYSTEMS	423-4030	EQUIP NUMBER	www.xpo.com	V DO
CONDITIONS HER		SHRINK WRAP INTACT?	:: 1524-030384 RENGE NUMBERS: MERGENCY CONTA DITIONAL PREFER	PALLET MOUNTS, VIBRATION SHOCK, RUBBE CCS CALIFORNIA COMPLIANCE SURCHARGE	DESCRIPTION OF ARTICLES AND REMARKS	025058	1914			DATE 03/14/2024	CNWY	
EIN, AND TARIFF C	LIFTGATE SERVICE CONSTRUCTION	DELIVERED	CHILD PRO #'s: 1524-030384 OTHER REFERENCE NUMBERS: BOL COR99838171 OTHER REFERENCE NUMBERS: BOL COR99838171 18X18X18INADDITIONAL PREFERENCES:BOL COR99838171. 1 PLT. CONS PH: 630-226-6488	PALLET MOUNTS, VIBRATION SHOCK, RUBBER/STEEL 93600-0 CLASS / O CCS CALIFORNIA COMPLIANCE SURCHARGE TOTAL	REMARKS		20500 PRAIRIE S1 CHATSWORTH, CA US 91311-3195	SHIPPER CALIFORNIA DYNAMICS CORP		ORIGIN UFV	CUST	DELIVE
NWY-199 IN EFFE	CONSIGNEE	PIECES	9838171. 1 PLT .CO	AL GLASS			A US 91311-3195	MICS CORP		DESTINATION NCH	CUSTOMER COLL	DELIVERY RECEIPT
CT ON DATE OF SH	CONSIGNEE SIGNATURE	TIME :	CHILD PRO #'s: 1524-030384 OTHER REFERENCE NUMBERS: BOL COR99838171 OTHER REFERENCE NUMBERS: BOL COR99838171 *** HAZMAT EMERGENCY CONTACT INTEGRATION PHONE: (630)2266488 ***.	THON THE	70					OUK KEVENOR		PAGE
IPMENT.	PRINT CONSIGN	DRIVER SIGNAT		te	-	WEIC			BILL TO		ADVANCE	
	EE NAME			305	305	WEIGHT (LBS.) RJ					BEYOND	
		3 / Unch	PATE	PPD		RATE CHARGES			APPT	LG900	ROUTE	PRO NUMBER 451-676186



PH: 323-223-3882 20500 Prairie St Chatsworth, CA 91311

PACKING SLIP

Packing Slip No.

P/025058

CA 91311

Call Us - To Set Things Right

Sold To:
Gripple Inc
1611 Emily Ln
Aurora, IL 60502

Ship To:
SUPERIOR MECHANICAL SYSTEMS, INC
600 ATANDO AVE
CHARLOTTE, NC
28206

		36	Qty Ordered Qty Shipped	Date Shipped: 3-14.24		XPO Logistics		Ship Via
2	ATTN: BEN WYKE 704-335-1942 TAG SHIPPING BOXES: HILTON HILTON HEAD AIRPORT TERMI	CQA F83-HDG-V Isolator Restraint Shipping and Handling 1 pallet 305# XPO	. "	Net 30	Payment	Prepaid/Add		Freight Terms
Ŋ	E 704-335-194 XES: HILTO APORT TERN	solator Restra ng 1 pallet 30		Sales Person	Ordered By	Complete		Partial
53	ATTN: BEN WYKE 704-335-1942 TAG SHIPPING BOXES: HILTON HEAD AIRPORT JOB NUMBER: 41-5252 HILTON HEAD AIRPORT TERMINAL IMPROVEMENTS	int 5# XPO	Description	TIM / DL	Jennifer Nicoletti	PO Date: 3/22/2024	P/025058	Purchase Order No.
	VUMBER: 41-5252				Vendor File No			Job Name

Shortages must be advised within 10 days after receipt of goods. Items are WARRANTED to be free from defects in workmanship and material at time of delivery but are not guaranteed for any specific length of time or measure of service. Our LIABILITY for defective material is limited to replacing the material or refunding the invoice value of the goods sold. Returns for CREDIT must have prior approval, returned in good order, prepaid, and with the ORIGINAL INVOICE. All returns are subject to inspection for acceptance. A restocking fee shall apply. No goods are returnable after 90 DAYS. SPECIAL ORDER or CUSTOM CUT material, when furnished correctly, cannot be returned for credit. The merchandise listed has been produced in accordance with the Fair Labor Standards Act of 1938 as amended.



P- 901-422-6200

PICK TICKET

No. 41-5252C

SOLD TO Superior Mechanical Systems, Inc.

Mguy@Superiormsinc.com Charlotte NC 28206

WAREHOUSE

SHIP TO
Superior Mechanical Systems, Inc.

600 Atando Ave Charlotte NC 28206

JOB NAME	YOUR ORDER NO.	DATE
41-5252 Hilton Head Airport Terminal	HILTON HEAD AIRPORT	03/06/2024
Improvements		
SHIPPED VIA	SHIP DATE	REP
BESTWAY	03/06/2024	Darren Pallesen
41-5252 Hilton Head Airport Terminal Improvements SHIPPED VIA BESTWAY	HILTON HEAD AIRPORT SHIP DATE 03/06/2024	03/06/2024 REP Darren Pallesen

76 76	24 24	2 2	QTY SHI
	7	, -	QTY SHIPPED B/O ITEM CODE
CD-FP-4x4-1	ECP-2x2	GS10-10E4-R4-2P	QTY SHIPPED B/O ITEM CODE
Caldyn Cork & Neoprene Pad (Without Plate)	Easy Cut Pad - 2" x 2" x 3/4" Rubber-40psi	GS10-Seismic Cable Kit - 10' with retro bracket (Red)	DESCRIPTION
25.84	2.40	3.00	WEIGHT

15x15x9 + 32165

MEMO

TOTAL

31.24 lbz

NO MERCHANDISE MAY BE RETURNED WITHOUT WRITTEN APPROVAL RECEIVED BY: DATE: THANK YOU







Allowance Log

Hilton Head Island Terminal Improvements Phase I

Pay App #6 - March 2024

ltem Number	Description	Scheduled Value	From Previous Application	This Period	Total Completed To Date	% Complete	Balance To Finish	Retainage
1	Gate 1 Counter Inserts (Allowance No. 1)	7,000			-	0%	7,000	0
2	Gate 2 Counter Inserts (Allowance No. 2)	7,000			-	0%	7,000	-
3	Temporary Signage (Allowance No. 3)	10,000			-	0%	10,000	ū.
4	Plan Review, Bldg. Permit, Utility Tap & Misc Fees (Allowance No. 4	125,000				0%	125,000	
5	Soil Testing for Percolation Rates & Composition Adjustment (Allowance No. 5)	10,000	-		-	0%	10,000	_
6	Cost to Move TSA and LEO Offices (Allowance No. 6)	200,000			-	0%	200,000	2
7	Contingeny Allowance	1,414,000			<u></u>	0%	1,414,000	<u> </u>
	Grand Totals	1,773,000	0	0	0	0%	1,773,000	0



COUNTY OF MECKLENBURG STATE OF NORTH CAROLINA

PARTIAL WAIVER OF LIEN

materials in connection with improvements on the following described project: Whereas, the undersigned has been employed by and/or contracted with Beaufort County to furnish labor and/or

Hilton Head Island Airport – Terminal Improvements Phase I Hilton Head Island, South Carolina 29926 120 Beach City Road

30, 2024. Unpaid retainage is excluded from this agreement. claims, or right of lien or claim under the statutes of the State of North Carolina, on the above described premises and improvements thereon on account of labor and/or materials furnished by the undersigned on or before March The undersigned, for and in consideration of receipt of \$861,594.81 does hereby waive and release any and all liens,

Contractor: Edison Foard, LLC

PO Box 19888

Charlotte, NC 28219-0888

Title: Signed by: **Nicholas Roberts** Project Manage

Signature:

THE STATE OF: North Carolina

COUNTY OF: Mecklenburg

acknowledged the due execution of the foregoing instrument. Witness my hand and official seal this 2nd day of April, 2024 Lisa R Wilbanks, Notary Public, do hereby certify that Nicholas Roberts, personally appeared before me this day and

arrive will with

Notary Public Signature

Print: Lisa R. Wilbanks

My commission expires: June 28, 2026

My Commission Expires June 28, 2026 Mecklenburg County LISA R. WILBANKS NOTARY PUBLIC North Carolina

Seal)

P.O. Box 19888

DBE PARTICIPATION REPORT

Date: 3/30/2024

DWNER: Beaufor	t County, South Carolin	na					PROJECT: TERMINAL	IMPROVEMENTS-P	HASE 1-IFB# 041923
CONTRACTOR: Edison	Foard, LLC								
CONTRACT AMOUNT:	\$27,196,809.29			% D	BE IN BID	0.00%	TOTAL DB	E AMOUNT IN BID	\$0.00
	CURRENT	PERIOD	FROM:	3/1/2024			TO: 3/30/2	024	
DBE/WBE SUBCONTRACTOR	DESCRIPTION OF WORK	DBE	WBE	SUPPLIER	SUB	OTHER	SUBCONTRACTOR'S AGREED AMOUNT	EARNING THIS PERIOD *	EARNING TO DATE
NONE THIS PERIOD									
If No Activity This Pay F	pove statement is true a	and corre	ct and	DD.			OTAL VALUE OF WORK Y PRIME CONTRACTOR		
supporting documentation at any time.	i is on file and is availal	ole for ins	spection			T	OTAL DBE EARNING TO	DATE	\$0.00
CONTRACTOR: Edison	Foard, LLC					D	BE% OF WORK PERFOR	RMED TO DATE	#DIV/0!

Wage and Hour Division

PAYROLL



For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR OR SUBCONTI		_						SS PO Box 1	9888	,					OMB No. 12	235-0008
Edison Foard, LLC								Charlotte	OR CONTRAC	Expires 09/30/2026						
19						HHIA	T AND LOCAT - Terminal I Beach City R	ACT NO.								
(1)	(2) SNO	(3)	SST.	(4) DAY	AND DATE	- T	(5)	(6)	(7)			DED	(8) DUCTIONS			(9)
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	OT. OR	HOURS WOR	RKED EACH	1 DAY	TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX			OTHER	TOTAL DEDUCTIONS	NET WAGES PAID FOR WEE
NOTHING TO REPORT			0													
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room \$3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date	4/2/2024			(b) WHERE FRINGE BENEFITS ARE PAIL	O IN CASH						
I.	Mark Kolb	Vice President		_							
	(Name of Signatory Party)	(Title)		 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 							
do hereby s	state:				us the amount of the required fringe benefits as listed noted in section 4(c) below.						
(1) Tha	at I pay or supervise the payment of the pers	ons employed by			THORSE IT SCOULDT TO SCIOTE.						
	Edison Foard,	LLC	Al	(c) EXCEPTIONS							
	(Contractor or Subcont		on the	EXCEPTION (CRAFT)	EXPLANATION						
HHIA	Terminal Improvements - Phase 1	that during the payroll period comme	encing on the								
	(Building or Work)										
25th d	bay of February 2024, and ending	ng the 2nd day of March									
all persons	employed on said project have been paid the be made either directly or indirectly to or on l	full weekly wages earned, that no ret	pates have								
	Edison Foard, L	LC									
	(Contractor or Subcor	ntractor)	_ from the full								
weekly wee	ges earned by any person and that no deduct	·	indiractly								
3 (29 C.F.R	il wages earned by any person, other than per 8. Subtitle A), issued by the Secretary of Labor 8, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 314	r under the Copeland Act, as amended									
				REMARKS:							
correct and applicable v set forth the (3) Tha program red Training, Ur	at any payrolls otherwise under this contract I complete; that the wage rates for laborers o wage rates contained in any wage determinaterein for each laborer or mechanic conform wat any apprentices employed in the above pergistered with a State apprenticeship agency routed States Department of Labor, or if no surgeau of Apprenticeship and Training, United States	r mechanics contained therein are not ion incorporated into the contract; that with the work he performed. iod are duly registered in a bona fide all recognized by the Bureau of Apprentice or recognized agency exists in a State,	less than the the classifications oppositely prenticeship and								
(4) Tha											
(8	a) WHERE FRINGE BENEFITS ARE PAID TO	O APPROVED PLANS, FUNDS, OR P	ROGRAMS	NAME AND TITLE Mark Kolb, Vice President	SIGNATURE						
	in addition to the basis havely we	nge rates paid to each laborer or mech	ania listad in	Main nois, vice i resident	SAFED .						
	the above referenced payroli, pa	syments of fringe benefits as listed in ropriate programs for the benefit of suc	the contract	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION TITLE 31 OF THE UNITED STATES CODE.	STATEMENTS MAN SUBJECT THE CONTRACTOR OR ON, SEE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF						

Wage and Hour Division

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WAGE AND HOUR DIVISION Revised December 2008

For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

AME OF CONTRACTOR OR SUBCONTRACTOR Edison Foard, LLC							ADDRESS PO Box 19888 Charlotte, NC 28219								OMB No. 1235-0008 Expires 09/30/2026	
PAYROLL NO. FOR WEEK ENDING 03/09/2024				PROJECT AND LOCATION HHIA - Terminal Improvements - Phase 1 120 Beach City Road, Hilton Head Island, SC 29926 PROJECT OR CONTRAC								CT NO.				
(1)	(2) SNO SNO	(3)				(5)	(6)	(7)			DE	(8) EDUCTIONS			(9)	
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	OT. OR ST	HOURS	WORKED E	EACH DAY	TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX			OTHER	TOTAL DEDUCTIONS	NET WAGES PAID FOR WEEK
NOTHING TO REPORT			0													
			s			\perp										
			0													
	\perp		s													
			0													
200			s													
			0													
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			0													
NA.			s													
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date4/2/2024		(b) WHERE FRINGE BENEFITS ARE PAID IN CASH
Mark Kolb	Vice President	
(Name of Signatory Party)	(Title)	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
do hereby state:		basic hourly wage rate plus the amount of the required fringe benefits as listed
(1) That I pay or supervise the payment of the persons	employed by	in the contract, except as noted in section 4(c) below.
Edison Foard, LLC		(c) EXCEPTIONS
(Contractor or Subcontract		on the EXCEPTION (CRAFT) EXPLANATION
HHIA Terminal Improvements - Phase 1	•	
(Building or Work)	at during the payron period commencing o	on the
3rd day of March 2024, and ending the	e 9th day of March 20	024
all persons employed on said project have been paid the full been or will be made either directly or indirectly to or on behi	weekly wages earned, that no rebates ha	ave
Edison Foard, LLC		
(Contractor or Subcontra		the full
weekly wages earned by any person and that no deductions	,	
63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145),	and described below:	
		REMARKS:
(2) That any payrolls otherwise under this contract requested and complete; that the wage rates for laborers or material applicable wage rates contained in any wage determination is set forth therein for each laborer or mechanic conform with the set of	echanics contained therein are not less that incorporated into the contract; that the class he work he performed. Are duly registered in a bona fide apprentic gnized by the Bureau of Apprenticeship an accognized agency exists in a State, are reg-	an the sifications ceship and
(4) That:		
(a) WHERE FRINGE BENEFITS ARE PAID TO A	PPROVED PLANS, FUNDS, OR PROGRA	AMS NAME AND TITLE SIGNATURE
		Mark Kolb, Vice President
the above referenced payroll, payme	ates paid to each laborer or mechanic lisents of fringe benefits as listed in the coate programs for the benefit of such emplo	Intract THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAN SUBJECT THE CONTRACTOR OR

Wage and Hour Division

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WAGE AND HOUR DIVISION

For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. Revised December 2008 NAME OF CONTRACTOR OR SUBCONTRACTOR ADDRESS PO Box 19888 OMB No. 1235-0008 Charlotte, NC 28219 Expires 09/30/2026 Edison Foard, LLC PROJECT AND LOCATION PROJECT OR CONTRACT NO. PAYROLL NO. FOR WEEK ENDING HHIA - Terminal Improvements - Phase 1 21 03/16/2024 IFB #041923 120 Beach City Road, Hilton Head Island, SC 29926 (4) DAY AND DATE (1) (2)(3) OF HHOLDING MPTIONS DEDUCTIONS NET NAME AND INDIVIDUAL IDENTIFYING NUMBER **GROSS** WITH-WAGES (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY WORK TOTAL RATE **AMOUNT** HOLDING TOTAL PAID HOURS WORKED EACH DAY NUMBER) OF WORKER CLASSIFICATION HOURS OF PAY **EARNED** FICA TAX OTHER DEDUCTIONS FOR WEEK NOTHING TO REPORT s 0 0 0 0 0 l٥ 0

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contracts and subcontractors and subcontractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

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Date4/2/20	24			(b) WHERE FRINGE BENEFITS AR	RE PAID IN CASH					
I.	Mark Kolb	Vice President								
(Name	e of Signatory Party)	(Title)		 Each laborer or mechanic listed in the above referenced payroll has as indicated on the payroll, an amount not less than the sum of the basic hourly wage rate plus the amount of the required fringe benefit 						
(1) That I pay o	r supervise the payment of the persons er	mployed by			scept as noted in section 4(c) below.					
(1,11111)	Edison Foard, LLC	.,,,	an Alexander	(c) EXCEPTIONS						
	(Contractor or Subcontractor)	on the	EXCEPTION (CRAFT)	EXPLANATION					
HHIA Termina	al Improvements - Phase 1 ; that	during the payroll period commer	ncing on the							
	ding or Work)		2024			5				
	d on said project have been paid the full we either directly or indirectly to or on behalf		ates have							
	Edison Foard, LLC		from the full							
	(Contractor or Subcontractor	or)	_ ITOITI UIE IUII							
3 (29 C.F.R. Subtitle	earned by any person, other than permissi A), issued by the Secretary of Labor unde t. 967; 76 Stat. 357; 40 U.S.C. § 3145), an	er the Copeland Act, as amended	(48 Stat. 948,							
correct and complete applicable wage rate set forth therein for each of the complete set forth therein for each of the complete set forth therein for each of the complete set forth the set for the complete set for the c	yrolls otherwise under this contract require; that the wage rates for laborers or medias contained in any wage determination indeach laborer or mechanic conform with the prentices employed in the above period are with a State apprenticeship agency recognites Department of Labor, or if no such recopprenticeship and Training, United States E FRINGE BENEFITS ARE PAID TO APF in addition to the basic hourly wage rates.	hanics contained therein are not licorporated into the contract; that the work he performed. e duly registered in a bona fide appliced by the Bureau of Apprentices ognized agency exists in a State, and Department of Labor. PROVED PLANS, FUNDS, OR PROVED PLANS, FUNDS, OR PROVED paid to each laborer or mechalogopartment of Laborer or mechalogopartment.	ess than the ne classifications prenticeship ship and are registered ROGRAMS anic listed in	NAME AND TITLE Mark Kolb, Vice President	SIGNATURE					
	the above referenced payroll, paymen have been or will be made to appropriat except as noted in section 4(c) below.	ts of fringe benefits as listed in	the contract	THE WILLFUL FALSIFICATION OF ANY OF THE SUBCONTRACTOR TO CIVIL OR CRIMINAL PRO TITLE 31 OF THE UNITED STATES CODE.	E ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION					

Wage and Hour Division

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NAME OF CONTRACTOR OR SUBCONTR	ADDRESS PO Box 19888 Charlotte, NC 28219							21	OMB No. 1235-0008 Expires 09/30/2026					
PAYROLL NO. FOR WEEK ENDING 03/23/2024					PROJE HHIA 120 E	CT AND LOCATI - Terminal II Beach City Re	t or contract no. 41923							
			(4) DAY AND DATE	(5)	(6)	(7)	(8) DEDUCTIONS						(9)	
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	OT. OR ST	HOURS WORKED EACH DAY	TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX			OTHER	TOTAL DEDUCTIONS	NET WAGES PAID FOR WEEK
NOTHING TO REPORT			0											
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contractors and subcontractors and subcontractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

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Date4/2/2024			(b) WHERE FRINGE BENEFITS ARE	PAID IN CASH
Mark Kolb	Vice President			
(Name of Signatory Party)	(Title)			nanic listed in the above referenced payroll has been paid, ayroll, an amount not less than the sum of the applicable
do hereby state:			basic hourly wage rate	te plus the amount of the required fringe benefits as listed as noted in section 4(c) below.
(1) That I pay or supervise the payment of the pe	ersons employed by			st as noted in section 4(o) below.
Edison Foar	d, LLC	an Aba	(c) EXCEPTIONS	
(Contractor or Subco	ontractor)	on the	EXCEPTION (CRAFT)	EXPLANATION
HHIA Terminal Improvements - Phase 1	; that during the payroll period comme	encing on the		
(Building or Work)		2024		
	nding the 23rd day of March	_,,		
all persons employed on said project have been paid to been or will be made either directly or indirectly to or of		pates have		
Edison Foard,	LLC	from the full		
(Contractor or Subo	contractor)			
weekly wages earned by any person and that no ded from the full wages earned by any person, other than 3 (29 C.F.R. Subtitle A), issued by the Secretary of La 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3	permissible deductions as defined in Reg bor under the Copeland Act, as amended	ulations, Part		
	= -		REMARKS:	
(2) That any payrolls otherwise under this contract correct and complete; that the wage rates for laborers applicable wage rates contained in any wage determines to forth therein for each laborer or mechanic conform. (3) That any apprentices employed in the above program registered with a State apprenticeship agency Training, United States Department of Labor, or if no with the Bureau of Apprenticeship and Training, United (4) That:	s or mechanics contained therein are not nation incorporated into the contract; that in with the work he performed. Deriod are duly registered in a bona fide any recognized by the Bureau of Apprentice such recognized agency exists in a State, d States Department of Labor.	less than the the classifications pprenticeship ship and are registered	MAME AND TITLE	CONSTRUCT
(a) WHERE FRINGE BENEFITS ARE PAID	TO APPROVED PLANS, FUNDS, OR P	ROGRAMS	NAME AND TITLE Mark Kolb, Vice President	SIGNATURE
in addition to the basic bourty	wage rates paid to each laborer or mech	nanic listed in	The state of the s	WEEP?
the above referenced payroll,	payments of fringe benefits as listed in ppropriate programs for the benefit of suc	the contract		BOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR CUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF

Wage and Hour Division

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Revised December 2008

ME OF CONTRACTOR OR SUBCONTRACTOR Edison Foard, LLC								ADDR	ADDRESS PO Box 19888 Charlotte, NC 28219							OMB No. 12 Expires 09/	OMB No. 1235-0008 Expires 09/30/2026	
PAYROLL NO. FOR WEEK ENDING 03/30/2024			PROJ HHI 120	PROJECT AND LOCATION HHIA - Terminal Improvements - Phase 1 120 Beach City Road, Hilton Head Island, SC 29926 PROJECT OR CONTRACT IFB #041923									NO.					
		(4) DAY AND DATE			(5)	(5)	(6)	(7)	(8) DEDUCTIONS					,,	(9) NET			
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	01.0	HOURS	WORK	ED EAG	CH DAY	TOTA HOUR	L	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX			OTHER	TOTAL DEDUCTIONS	WAGES
NOTHING TO REPORT			o															
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

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Date		(b) WHERE ERING	GE BENEFITS ARE PAID IN	CASH						
Mark Kolb	Vice President									
(Name of Signatory Party)	(Title)		 Each laborer or mechanic listed in the above referenced payroll has be as indicated on the payroll, an amount not less than the sum of the ap 							
do hereby state:			basic hourly wage rate plus th	ne amount of the required fringe benefits as listed						
(1) That I pay or supervise the payment of the pers	ons employed by		in the contract, except as note	ed in section 4(c) below.						
Edison Foard,	, , ,	(c) EXCEPTIONS								
(Contractor or Subcont		on the	ION (CRAFT)	EXPLANATION						
HHIA Terminal Improvements - Phase 1	that during the payroll period commend	sing on the		EXI EXIATION						
(Building or Work)	_, and during the payton police commone	, , , , , , , , , , , , , , , , , , ,								
24th day of March , 2024 , and endi	ng the 30th day of March	, 2024 ,								
all persons employed on said project have been paid the been or will be made either directly or indirectly to or on		es have								
Edison Foard, L	LC	From the full								
(Contractor or Subco		from the full								
weekly wages earned by any person and that no deduc from the full wages earned by any person, other than pe 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labo 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 314	rmissible deductions as defined in Regula or under the Copeland Act, as amended	itions, Part								
the above referenced payroll, pa	or mechanics contained therein are not lestion incorporated into the contract; that the with the work he performed. Triod are duly registered in a bona fide apprecognized by the Bureau of Apprenticesh ch recognized agency exists in a State, ar States Department of Labor. O APPROVED PLANS, FUNDS, OR PROPROVED PLANS, FUNDS, OR PROPROMED PLANS, FUNDS, OR PROPROPROMED PLANS, FUNDS, OR PROPROMED PLANS, FUNDS, OR PROPROMED PLA	ss than the classifications renticeship ip and e registered OGRAMS NAME AND TITLE Mark Kolb, Vice Presidual listed in e contract THE WILLFUL FALSIFICA	dent TION OF ANY OF THE ABOVE STAT L OR CRIMINAL PROSECUTION. SE	SIGNATURE TEMENTS IN A SUBJECT THE CONTRACTOR OR REE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF						

Wage and Hour Division

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For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR OR SUBCONTRACTOR ADDRESS 788 D LONGWOOD DR RICHMOND HILL, GA Expires 09/30/2026 SOUTHEAST WALLS & CELLINGS PROJECT OR CONTRACT NO. Hilton Head Island Airport Terminal Improvements-Phase 1 2/24/ IFB #041923 120 Beach City Rd., Hilton Head Island, SC 29926 (4) DAY AND DATE (1) (9) (8) DEDUCTIONS 19 20 21 22 23 24 NET NAME AND INDIVIDUAL IDENTIFYING NUMBER GROSS WITH-WAGES (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY TOTAL HOLDING RATE **AMOUNT** WORK TOTAL PAID HOURS WORKED EACH DAY NUMBER) OF WORKER OF PAY EARNED FICA TAX OTHER DEDUCTIONS FOR WEEK GUSTAVO LOPEZ 840.00 9048 9 10 10 30.00 JORGE MARTINEZ 0 2745 s 8 540.00 10 30.00 1540,00 NATHEN DEFIBAUGH ٥ 8253 s 300,00 VASMIN LOPEZ 10 30,00 300.00 10 ٥ AGUSTIN MEDINA 35000 25.00 350.00 10 JESUS MEDINA 350.00 s 10 350.00 25.00 o 6669 s 250.00 10 25-00 350,00 JOSUE PELLO 0 3067 4 25.00 350.00 350.00 10 ٥

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

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Washington, D.C. 20210

Date 3 /9/24	(b) WHERE FRINGE BENEFITS ARE PAID IN CASH	4
FOLE SOLLARD 7 - APPRATIONS MAINLY		
1, ERIC SCHWARZE OPERATIONS MANAGER (Name of Signatory Party) (Title)	Each laborer or mechanic listed in	the above referenced payroll has been paid,
do hereby state:		ount not less than the sum of the applicable nount of the required fringe benefits as listed section 4(c) below.
(1) That I pay or supervise the payment of the persons employed by		
SOUTHEAST WALLS & CEILINGS on the	(c) EXCEPTIONS	
(Contractor or Subcontractor)	EXCEPTION (CRAFT)	EXPLANATION
HILTON HEAD ALPORT TERM. ; that during the payroll period commencing on the (Building or Work)		
18 day of FEB 2024, and ending the 24 day of FEB 2024		
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		
Southerst Walls & Cottlinds from the full (Contractor or Subcontractor)		
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 Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:		
F	REMARKS:	
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or 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 he 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 recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.		
(4) That:		
(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS		ATURE &
In addition to the basic hourly wage rates paid to each laborer or mechanic listed in	ERIC SCHWARZE OP.MGE	the lives
the 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.	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMEN SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SE TITLE 31 OF THE UNITED STATES CODE.	NTS MAY SUBJECT THE CONTRACTOR OR CTION 1001 OF TITLE 18 AND SECTION 3729 OF

Wage and Hour Division

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Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR OR SUBCONTRACTOR OMB No. 1235-0008 788D LONGWOOD DR. Southeast WALLS & CAUNGS RICHMOND HU, 6A Expires 09/30/2026 PROJECT OR CONTRACT NO. PROJECT AND LOCATION PAYROLL NO. FOR WEEK ENDING Hilton Head Island Airport Terminal Improvements-Phase 1 MARCH 2, 2024 IFB #041923 120 Beach City Rd., Hilton Head Island, SC 29926 (4) DAY AND DATE (1) (2)(9) (8) DEDUCTIONS 26 27 28 29 NET NAME AND INDIVIDUAL IDENTIFYING NUMBER **GROSS** WITH WAGES (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY WORK TOTAL RATE AMOUNT HOLDING TOTAL PAID NUMBER) OF WORKER HOURS CLASSIFICATION HOURS WORKED EACH DAY OF PAY EARNED FICA TAX OTHER DEDUCTIONS FOR WEEK YASMIN WPEZ 1000.00 100000 10 10 10 10 40 25.00 ACUSTIN MEDINA 1735 1000.00 25.00 1000.00 0 10 10 10 40 0 JESUS WEDINA s 10 10 10 10 40 2500 1000.00 1600.00 0 3 40 1000,00 10 10 10 10 25.00 1000.00 0 0 S 0 a

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fininge benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and complete this collection, including time for reviewing instructions, including time for reviewing instructions, searching existing the data needed, and complete this collection, including time for reviewing instructions, including time for reviewing the collection, including time for reviewing instructions, and the property of the data needed, and complete this collection, including time for reviewing time for reviewing the data sources, gathering and maintaining time data needed, and complete this collection, including time for reviewing the collection, including time for reviewing the data sources, gathering and maintaining time data needed, and complete this collection, including time for reviewing time for reviewing the data sources, gathering and maintaining time data needed, and complete this collection, including time for reviewing time for reviewing the data sources, gathering and maintaining time data needed, and complete this collection, including time for reviewing time for review

Date 3/19/24	(b) WHERE FRINGE BENEFITS ARE PAID IN CA	sн
I, ERIC SCHWARZE OPERATIONS MANAGER (Name of Signatory Party) (Title) do hereby state:	as indicated on the payroll, an ar	in the above referenced payroll has been paid, mount not less than the sum of the applicable amount of the required fringe benefits as listed in section 4(c) below.
(1) That I pay or supervise the payment of the persons employed by	(c) EXCEPTIONS	
SouthEAST WALLS & CETUNGS on the (Contractor or Subcontractor)	EXCEPTION (CRAFT)	EXPLANATION
HILTON HEAD ALLPORT TERM ; that during the payroll period commencing on the	Execution (CAPT)	EA-DAVATION
HILTON HEAD ALLPORT TORM; that during the payroll period commencing on the (Building or Work) ZS day of FEB 2024, and ending the Z day of MARCH, 2024		
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		
Southeast Wines & Collings from the full (Contractor or Subcontractor)		
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 Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:		
	REMARKS:	
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or 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 he 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 recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered		
with the Bureau of Apprenticeship and Training, United States Department of Labor.		
(4) That:(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	The state of the s	NATURE PULL
In addition to the basic hourly wage rates paid to each laborer or mechanic listed in	ERIC SOHWARZE OP. MOR	me though
the 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, except as noted in section 4(c) below.	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEM SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE: TITLE 31 OF THE UNITED STATES CODE.	TENTS MAY SUBJECT THE CONTRACTOR OF SECTION 1001 OF TITLE 18 AND SECTION 1729 OF

Wage and Hour Division

PAYROLL

WAGE AND HOUR DIVISION Revised December 2008

For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. NAME OF CONTRACTOR OR SUBCONTRACTOR ADDRESS OMB No. 1235-0008 788D LONGWOOD De DICHMOND HUL GA SOUTHEAST WALLS & CELLINGS Expires 09/30/2026 PROJECT AND LOCATION PROJECT OR CONTRACT NO. FOR WEEK ENDING 3 Final Hilton Head Island Airport Terminal Improvements-Phase 1 MARCH 9, 2024 IFB #041923 120 Beach City Rd., Hilton Head Island, SC 29926 (4) DAY AND DATE (2) (6) (7) (9) (8) DEDUCTIONS NET NAME AND INDIVIDUAL IDENTIFYING NUMBER GROSS 7 8 WITH-WAGES (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY TOTAL WORK RATE AMOUNT HOLDING TOTAL PAID CLASSIFICATION NUMBER) OF WORKER HOURS WORKED EACH DAY OF PAY EARNED FICA TAX OTHER DEDUCTIONS FOR WEEK YASMIN WPEZ AGUSTIN MEDINA 1000.00 40 25.00 10/10/10/10 1000.00 0 1735 1000,00 10/10/10/10 40 25:00 1000.00 JOSUS MEDINA 0 6669 10/10/10/10 1000.00 40 25.00 1000.00 Josue Tello 1000,00 40 10/10/10/10 25.00 000,00 0 0 s 0 0

White completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborar or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date 3/19/24	(b) WHERE FRINGE BENEFITS ARE PAID IN CASH
I, ERIC SCHWARZE OPERATIONS WANAGER (Name of Signatory Party) do hereby state: (Title)	 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.
(1) That I pay or supervise the payment of the persons employed by	(c) EXCEPTIONS
Southerst Walls & CZILINGS on the (Contractor or Subcontractor)	EXCEPTION (CRAFT) EXPLANATION
HLTON HERD AIRPORT TERM ; that during the payroll period commencing on the (Building or Work)	
3 day of MARCH , 2024 and ending the 9 day of MARCH , 2024	
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	
SOUTHEAST WALLS & CETLINGS from the fur (Contractor or Subcontractor)	п
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 Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 94: 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:	
	REMARKS:
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classificat set forth therein for each laborer or mechanic conform with the work he 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 recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registere with the Bureau of Apprenticeship and Training, United States Department of Labor.	d
(4) That: (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE SIGNATURE
	EDIC SCHOOL F 00 MGQ
 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 been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below. 	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR USUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF TITLE 31 OF THE UNITED STATES CODE.

Pay Period Date: Week Ending: Payroll No:

02/17/24 02/17/24 5

Certified Payroll Report

Contract #: Job No: Job Name:

1069 1069 HILTON HEAD AIRPORT EXPAN

BLUF 843	FTON, SC 29910 987-0500	

	# Exemptions				н										
Employee	Social Security Work Class	SUN 11	MON 12	TUE 13	WED 14	THU	FRI	SAT					Check Tota	ılış	
BECK, DYLLAN MICHAEL	Ex: S-01 C M 0 ***-*-0469 S OPERATOR-BULLD	0.00	0.00	0.00	0,00	0.00 0.00	5.50 2.00 Vecation Holiday Sick Other Job		5.50 2.00	31,50 21.00	173.25 42.00 0.00 0.00 0.00 4.35 219.60	Fed W/H FICA State W/H Local W/H Wcomp/8dl 401K-%	73.60 79.75 39.26 0.00 0.00	Gross Taxons Dedunts Add-Ons Not Pay Check 8:	1,038.25 192.61 31.15 4,35
Other Job Pay Descrip	tion		Rate		mount	Non-cash									
CF PREV	WAGE FRING		0.58		4.35										
					4.35	6.00									
TAYLOR, JARED NICOLAUS	Ex: S-04 B M O ***-**-4257 8 OPERATOR-LOADE	0.00	0.00 0.00	0,00	0.00	0.00	7.00 0.00 Vacation Holiday Sick Other Job		7.00 0.00	33.00 0.00	231.00 0.00 0.00 0.00 0.00 0.00 0.00 231.00	Fed W/H FICA State W/H Local W/H Wcomp/Sdi HEALTH INS DEVTAL INS VISION INS	0.00 84.78 50.61 0.00 0.00 53.05 8.34 1.40	Gross Taxes Deducts Add-Ons Not Pay Check #:	1,169,00 135,29 60,79 0,00 972,92 508351

Statement of Compliance

Date:	FEB	RUA	RY	22.	2024	
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I, Anita S. Mixson, HR/Payroll Manager do bereby state:

Contract Number: 1069

(1) That I pay or supervise the payment of the persons employed by CLELAND CONSTRUCTORS, INC. on the HILTON HEAD AIRPORT EXPAN, that during the payroll period commencing on the 11 day of FEBRUARY, 2024 and ending the 17 day of earned by any person and that no deductions have been made either directly or indirectly to or on behalf of said CLELAND CONSTRUCTORS, INC. from the full weekly wages carned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the

- (2) That any payrolls otherwise under this contract required to be submitted for the above period see correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that
- (3) That any apprentices employed in the above period are duly registered in a bons fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State,
- (4) That:
 - (a) WHERE PRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS
 - In addition to the besic 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 been or will be made to appropriate programs for the beautift of such simple yees, except as noted in Section 4(c) below.
 - (L) 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
 - (c) EXCEPTIONS

EXCEPTION (Creft)	EXPLANATION
MARKS	
MBAND TITLE	SKONATURE / V
nita S. Mixson, HR/Payroll Manager	SECRETURE
to willful felsification of any of the above statements may subject the contractor or subcontractor to civil or criminal prosecut	

BLUFFTON, SC 29910 843 987-0500 Pay Period Date: Week Ending: Payroli No: 02/24/24 02/24/24 6

Certified Payroll Report

Contract #: Job No: Job Name:

1069

1069 HILTON HEAD AIRPORT EXPAN

		# Exemptions					Н	ours -									
Employee		Social Security Work Class		UN 18	MON	TUE	WED	THU	FRI	SAT			-		hack Tols	-	
BECK, DYLLAN MIC	HAEL	Ex: S-01 C M ***-:*-0469 OPERATOR-BUI	3	0.00	0.00 10.00	0,00 10.00	0.00 10.00	0,00 10,00	7,50 0,00 Vacation Holiday Sick Other Jo	b Pay	15.00 40.00	31.50 21.00	472.50 840.00 0.00 0.00 0.00 11.88 1,324.36	Peductions Fed W/H FICA State W/H Local W/H Weamp/SdI 401K-%	121.51 103.23 56.41 0.00 0.00 40.13	Groen Taxes: Deducta Add-Ons Net Pay Hours: Tex+Deci:	1.337.5 281.1 40.1 11.8 1,028.0 55.0 321.2
Other Job Pay	Description				Amount	No	n-cash	Rete								Crieck #.	508373
CF	PREV WA	GE FRING			11,86			0,22									
					11,86		0.00										
BILLITTERI, JOSEP	H ERIC	Ex: -00 C M ***-**-0934 PROJECT MANA	o s AGER	0.00	0.00	0.00 1.00	0.00	0.00	0.00 1.00 Vacation Hollday Sick Other Jo Total Jo	ib Pay	0.00 5.00	0.00 48.95	0.00 244.75 0.00 0.00 0.00 0.00 244.75	Fed W/H FICA State W/H Local W/H Wcomp/Sdi 401K-% HEALTH INS LIFE INS-F	443.02 205.16 138.35 0.00 0.00 163.04 35.49 28.63	Texas Deduct: Add-On: Net Pery Hours:	2,717.3 787.5 227.0 0.0 1,702.7 55.0 1.014.5 E12587
SMITH, ZACHARY	ORDAN	Ex: S-01 C M ***-*-8451 OPERATOR-BUI	o s LLDOZER	0.00	0.00	0.00	0.00	0.00	0.00 0.00 Vacation Holiday Sick Other Je Total Jo	ob Pay	0.00	0.00 24.00	0,00 240,00 0.00 0.00 0.00 0.00 240.00	Fed W/H FICA State W/H Local W/H Woomp/Sdll HEALTH INS DENTAL INS	190.07 114.33 68.12 0.00 0.00 35.49 13.04	Deduct, Add-Ons Net Pay Hours: Tax+Ded:	1.543.0 372.5 48.5 0.0 1,121.9 55.5 421.0
TAYLOR, JARED NI	COLAUS	Ex: S-04 B M ***-**-4257 OPERATOR-LO	o s ADER	0,00	0.00 10.50	0,00 10.50	0.00 10.50	1,50 8,50	0.00 0.00 Vacation Holiday Slok Other Ju	ob Pay	1.50 40.00	33,00 22.00	49.50 880.00 0.00 0.00 0.00 0.00 929.50	Fed W/H FICA State W/H LOCAL W/H Woomp/Sdll HEALTH INS DENTAL INS VISION INS	52.46 108.24 67.03 0.00 0.00 53.05 6.34 1.40	Taxes Deducts Add-Ons Ret Pay Hours: Tax+Ded:	1,449.5 225.7 60.7 0.0 1,162.9 56.5 286.5

Statement of Compliance

Date	FEBRU	IADV	20	2024
DATE:	FEDR	JARI	Z9.	ZUZA

L Anita S. Mixaon, HR/Payroll Manager do hereby state:

Contract Number: 1069

(i) That I pay or supervise the payment of the persons employed by CLELAND CONSTRUCTORS, INC. on the HILTON HEAD AIRPORT EXPAN, that during the payroll period commencing on the 18 day of FEBRUARY, 2024 and ending the 24 day of FEBRUARY, 2024, 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 CLELAND CONSTRUCTORS, INC. from the full weekly wages carned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the

- (2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that
- (3) That any apprendices employed in the above period are duly registered in a bone fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State,

(4) That:

- (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS
- in addition to the besic bourly wage rates paid to each laborer or mechanic fisted in the above referenced payroll, payments of frings benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such amployees, except as noted in Section 4(c) below.
- (b) WHERE FRINGE BENEFITS ARE PAID IN CASH
- Each laborer or machanic listed in the above referenced payroll less been paid as indicated on the payroll, an amount not less than the sam of the applicable basic hourly wage sate plus the amount of the sequired fringe benefits as listed in the contract, except as noted in

(c) EXCEPTIONS

EXCEPTION (Craft)	EXPLANATION
	v v
BMARKS	
AME AND TITLE	SIGNATURE //
nita S. Mixson, HR/Payroll Manager	A

Pay Period Date: Week Ending: Payroll No: 03/02/24 03/02/24

Certifled Payroll Report

Contract #: Job No: Job Name: 1069 1069

HILTON HEAD AIRPORT EXPAN

BLUFFTON, SC 28910 843 987-0500

	# Examptions					STATE									
Employee			10N 28	TUE 27	WED 28	THU	FRI	SAT					heck Total		
BECK, DYLLAN MICHAEL	Ex: 8-01 C M O TO T	0.00	0.00 10.00	0.00	0,00	0.00 10.00	0.00 7.50 Vacation Hollday Siok Other Jo Total Job	b Pay	0.00 37.50	0.00 21.00	0.00 787.50 0.00 0.00 0.00 0.00 0.00 787.50	Fed W/h FICA FICA State W/h Local W/h Woomp/Sdl 401K-%	46.80 62.16 28.39 0.00 0.00 24.38	Total Gruss Taxose Deducts Add-Ons Not Pay Hours: Taxo-Ded: Check #:	812,5 135.3 24.3 0.0 852,7 37.5 159.7
NETTLES, JOSEPH H	Ex: M-00 C M	0.00	0.90	0.00	0,00 10,00	0.00 10.00	7.50 0.00 Vacation Hollday Sick Other Jo Total Jot	b Pay	7.50 20.00	33.00 22.00	247,50 440.00 0.00 0.00 0.00 0.00 687.50	Fed WAH FICA State W/H Local W/H Woomp/Sdi HEALTH INS LIFE INS-F S TERM DIS L TERM DIS DENTAL INS VISION INS	119.86 83.52 69.56 0.00 0.00 53.05 13.41 13.02 11,44 6.34	Gross Taxes Deducts Add-Ons Net Pay Hours; Tax+Ded: Check #:	1,152,5(272,7- 98.6(0.0(781,1) 47.5 371.4 E12652
SMITH, ZACHARY JORDAN	Ex: S-01 C M O ****-#8451 S OPERATOR-BULLDOZER	0.00	0.00	0.00	0.00	0.00	0.00 7.50 Vacation Holiday Sick Other Jo	b Pay	0.00 17.50	0,00 24.00	0.00 420.00 0.00 0.00 0.00 0.00 420.00	Fed W/H FICA State W/H Local W/H Woomp/Sdi HEALTH INS DENTAL INS	78,96 67,04 31,48 0,00 0,00 35,49 13,04	Gross Taxes Deducts Add-Ons Net Pay Hours: Tax+Ded: Check #:	925.0 175.4 48.5 0.0 701.0 37.5 224.0
SMITH, ZACHARY JORDAN	Ex: 8-01 C M O	0.00 0.00	0.00	0.00	0.00 2.00	0.00	0.00 0.00 Vecation Holiday Sick Other Jo Total Joi	b Pay	0.00 2.00	0,00 24.00	0.00 48.00 0.00 0.00 0.00 0.00 0.00 48.00	Fed W/H FICA State W/H Local W/H Wcomp/Sdi HEALTH INS DENTAL INS	78.95 67.04 31.48 0.90 0.90 35.49 13.04	Gross Taxes Deducts Add-Ons Nat Pay Hours: Tax+Ded; Check #:	925.0 175.4 48.5 0.0 701.0 37.6 224.0

BLUFFTON, SC 29910

Pay Period Date: Week Ending: Payroll No: 03/02/24 03/02/24 7

Certified Payroll Report

Contract #: Job No: Job Name:

1069 1089

HILTON HEAD AIRPORT EXPAN

843 987-0500 # Exemptions Hours Sociel Security Check Totals SUN MON TUE WED THU FRI SAT Employee Work Class 25 26 27 Deductions 28 29 Totals 01 02 Total Rate Gross Pay TAYLOR, JARED NICOLAUS Ex: S-04 B M 0.00 0.00 0.00 0,00 0,00 0.00 0.00 0.00 0.00 0.00 Fed W/H 0.00 Gross ***-**-4257 839.00 S 0.00 0.00 8.00 0.00 0.00 0.00 0.00 8.00 22.00 178.00 FICA 59.53 T89004 91.03 LABORER-GENERAL State W/H Vacation 31.50 0.00 Deducts 60.79 Locel W/H 0.00 Holiday 0.00 Add-Ons 0.00 Woomp/3dl 0.00 Sick 0.00 **Net Pay** 687.18 **HEALTH INS** 53.05 Other Job Pay 0.00 Hours: DENTAL INS 37.00 6.34 Total Job Pay 176.00 VISION INS 1.40 Tex+Ded: 151.82 Check#: 508611 TAYLOR, JARED NICOLAUS Exc S-04 B M 0 0.00 0,00 0.00 0.00 0.00 0,00 0.00 0.00 0.00 0.00 Fed W/H 0.00 Gross 839.00 ***-**-4257 S 0.00 0.00 0.00 10.50 10.50 0.00 0.00 FICA 21,00 22.00 462.00 59.53 Taxes 91.03 OPERATOR-ROLLER State W/H Vacation 31.50 0.00 Deducts 60,79 Local W/H Holiday 0,00 0.00 Add-Ons 0,00 Woomp/Sdl 0,00 Sick 0,00 Net Psy 687.18 HEALTH INS 53.06 Other Job Pay 0,00 Hours: **DENTAL INS** 37.00 6,34 Total Job Pay 462.00 VISION INS 1.40 Tax+Dad: 151.82 Check#: 508611 TAYLOR, JARED NICOLAUS Ex: S-04 B M 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 Fed W/H 0.00 Gross 839.00 ----4257 S 0.00 0.00 0.00 0.00 0.00 8.00 FICA 0.00 8,00 22,00 176.00 59,53 Taxes 91.03 OPERATOR-LOADER Vacation State W/H 31.50 Deducts 0.00 60.79 Local W/H Holiday 0.00 0.00 Add-Ona 0.00 Wcomp/Sdl 0.00 Sick 0.00 Net Pay 687,18 **HEALTH INS** 53.05 Other Job Pay 0.00 **DENTAL INS** Hours: 37.00 6.34 **Total Job Pay** 176.00 VISION INS Tex+Ded: 1,40 151.82

Check #: 508611

Statement of Compliance

Date: MARCH 7, 2024

1, Anita S. Mixson, HR/Psyroli Manager do hereby state:

Contract Number: 1069

(1) That I pay or supervise the payment of the persons employed by CLELAND CONSTRUCTORS, INC. on the HILTON HEAD AIRPORT EXPAN, that during the payroll period commencing on the 25 day of FHBRUARY, 2024 and ending the 2 day of MARCH, person and that no deductions have been made either directly or indirectly to or on behalf of said CLELAND CONSTRUCTORS, INC. from the full weekly wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act,

- (2) That any payrolls otherwise under this contract required to be automitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that
- (3) That any apprentices employed in the shows period are duly registered in a boss fide apprenticestrip program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State,

(4) That:

- (a) WHERE PRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS
- In addition to the basic hourly wage rates paid to each inherer or enochanic listed in the above referenced payroll, payments of fringe benefits as fixed in the contract have been or will be made to appropriate programs for the benefit of such amployees, except as noted in Section 4(a) below.
- (b) WHERE FRINGE BENEFITS ARE PAID IN CASH
- Each laborer or machanic listed in the above referenced payroll has been paid as indicated on the payroll, an amount 70t less than the sum of the applicable basic hourly wage rate plus the amount of the required frings benefits as listed in the contract, except as noted in

(e) EXCEPTIONS

EXCEPTION (Craft)	EXPLANATION
DIARRS	
DMARKS AME AND TITLE	SIGNATURE /

Pay Period Date: Week Ending: Payroll No:

03/09/24 03/09/24

Certified Payroli Report

Contract #: Job No:

1069

LUFFTON, SC 29910 843 987-0500		Peryrot	l No:	8	103/24								Job No: Job Nama:	1069 HILTON HEAD	AIRPOR	T EXPA	1
		# Exemptions Social Security	-	SUN	MON	71.00		DUFFE							Check Total	ło.	
Employee		Work Class		03	04	TUE 05	WED 08	THU 07	FRI 08	SAT 09	Total	Rate	Gross Pay	Dertuctions		Tot	mia
BECK, DYLLAN MICH	AEL	Ex: S-01 CM ***-0-0489 OPERATOR-BU	8 PLLDOZE	0.00 0,00 R	0.00 10.00	0,00 10,00	0.00 4.00	0.00	1,50 6,00 Vscatio Holiday Sick Other Jo	0.00 0.00 n	1.50 40.00	31.50 21.00	47.25 840.00 0.00 0.00 0.00 1.19 688.44	Fed W/N FICA State W/H Lonal WH Woomp/Sdii 401K-%	58.85 69.89 32,04 0.00 0.00 27.37	Cross Taxes Deducts Add-Ons Net Pay Hours: Tax+Ded	912.25 160.48 27.37 1,19 725.59 41.50
Other Job Pay	Description	n			Amount	No	on-cash	Rate								Check #;	508637
CF	PREV WA	AGE FRING			1.19			0.03									
					1,19		0.00										
NETTLES, JOSEPH H		Ex: M-00 C M ***-5275 DRIVER	0 8	0.00	0.00	0.00	0.00	0.00 0.00	0.00 0.00 Vacatio Holiday Sick Other Je	ob Pay	0.00 22.00	0.00 22.00	0.00 484.00 0.00 0.00 0.00 0.00 484.00	Fed W/H FICA State W/H Local WH Woomp/Sdi HEALTH INS LIFE NAS-F 9 TERM DIS L TERM DIS DENTAL INS VISION INS	112.40 80.99 67.85 0.00 0.00 53.05 13.41 13.02 11.44 8.34	Gross Textus Deducts Add-Ons Net Pay Hours: Tex+Dedi Chack 6:	1.119.5 261.0 98.66 0.00 759.86 46.5 359.70 E12897
SMITH, ZACHARY JOH	RDAN	Ex: 8-01 CM ***-*-8461 OPERATOR-BU	o 8 ILLDOZE	0.00 0.00 R	0.00 10.00	0.00	0.00 9.50	0.00 10.00	7.00 0.50 Vecation Holiday Stok Other Ju Total Jo	ob Pay	7.00 40.00	36.00 24.00	252.00 960.00 0.00 0.00 0.00 0.00 1,212.00	Fed W/H FICA State W/H Local W/H Woomp/SdI HEALTH INS DENTAL INS	122,75 90,83 49,45 0,00 0,00 35,49 13,04	Gross Texes Deducts Add-Ons: Net Puy Hours; Tex+Ded: Check #:	1,237,00 263,13 48,53 0,00 925,34 47,00 311,66 508740
SOLOMON, AARON D	ETRIC	Ex: -99 B M ***-**-3521 OPERATOR-EX	o 8 CAVATO	0,00 0.00	0.00	0.00	0.00	0.00	0.00 0.00 Vacatio Holiday Sick Other Ju Total Ju	ob Pay	0.00 0.00	0,00 27,00	0.00 0.00 0.00 0.00 0.00 0.00	Fed WAH FICA State WAH I ocal WAH Weemp/Sdi HEALTH INS UNIFORMS- PHONE INSU LIFE INS-F	0,00 0,00 0,00 0,00 0,00 0,00	Gross Taxics Deducts Add-Ons Net Pay Fours: Text+Ded: Check if:	0.00

Pay Period Date: Week Ending: Payroll No:

03/09/24 03/09/24 8

Certified Payroli Report

Contract #: Job No: Job Name:

1089

1069 HILTON HEAD AIRPORT EXPAN

BLUFFTON, SC 29910	
843 987-0500	

	# Exemptions				He	PRECIO DE LA COMPANION DE LA C									
Employee	Social Security Work Class	SUN	MON	TUE	WED	THU	FRI	SAT					Check Tota	als.	
SOLOMON, AARON DETRIC	Exc -99 B M 0	0.00	0.00	0.00	06	07	80	09	Total	Rate	Gross Pay	Deductions		Tot	inte
	OPERATOR-EXCAVAT	0.00	0.00	0.00	0.00	0.00	0.00 0.00 Vacation Holiday Sick Other Jo Total Jo	ob Pay	0.00	0.00 27,00	0.00 0.00 00.0 00.0 00.0 00.0	Fad Wift FICA Sata Wift Local Wift Woomplist HEALTH INS UNIFORMS PHONE INSU LIFE INS-F	0,00 0.00 0.00 0.00 0.00	Gross Teau: Deducts Add-On: Net Pay Hours: Tex+Ded: Cheak it:	0.00
SOLOMON, AARON DETRIC	Ex: -99 B M O ***.**-3521 S LABORER	0.00	0.00	0.00	0.00	0.00	0.00 0.00 Vacation Holiday Sick Other Jo Total Jo	ob Pay	0.00	0.03 27.00	0.00 270.00 0.00 0.00 0.00 0.00 270.00	Fed W/H FICA State W/H Logal W/H Wcomp/Sdi MEALTH INS UNIFORMS- PHONE INSU LIFE INS-F DENTAL INS 401K-% 8 TERM DIS Other	0,00 58.85 0,00 0,00 0,00 212.20 188.52 36.92 28.36 25.38 20.25 16.64 11.20	Gross Textuck Deducts Add-On: Net Pay Hours: Text-Ded: Check #:	1,012.50 58.85 517.45 0.00 436.20 37.50 576.30
TAYLOR, JARED NICOLAUS	Ex: S-04 B M 04257 B OPERATOR-ROLLER	0.00	0.00	0.00	0,00 9.50	0.00	0,00 0.00 Vacation Holiday Stok Other Jo	ob Pay	0.00 9.50	0.00 22.00	0.00 209.00 0.00 0.00 0.00 0.00 209.00	Fed W/H FICA Suite W/H Local W/H Woomp/3dt HEALTH INS DENTAL INS VISION INS	0.00 42.48 18.65 0.00 0.00 53.05 6.34 1.40	Gross Taxes Deducts Add-One; Net Pay Hours: Tax+Ded: Check #;	12.1300
TAYLOR, JARED NICOLAUS	Ec S-04 B M O ***-**-4257 S OPERATOR-LOADER	0.00	0.00	0.00	0.00	0,00 10.50	0.00 8.00 Vacation Holiday Sick Other Jo Total Jo	b Pay	0.00 18.50	0.00 22,00	0.00 407.00 0.00 0.00 0.00 0.00 407.00	Fed W/H FICA State W/M Local W/H Woomp/SdI HEALTH INS DENTAL INS VISION INS	0,00 42,48 18,65 0,00 0,00 53,05 6,34 1,40	Gross Taxes Deducts Add-Ons Not Pay Hours: Tax+Ded: Check #:	12 1.02

Statement of Compliance

Date: MARCH 14, 202	Date:	MA	RCH	14.	2024
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1. Amita S. Mixson, HR/Payroll Manager do hereby state:

Contract Number: 1069

(1) That I pay or supervise the payment of the persons employed by CLELAND CONSTRUCTORS, INC. on the HILTON HEAD ARPORT EXPAN, that during the payroll period commencing on the 3 day of MARCH, 2024 and ending the 9 day of MARCH, 2024, and that no rebates have been or will be made either directly or indirectly to or on behalf of said CLELAND CONSTRUCTORS, INC. from the full weekly wages earned by any person amended (48 Stat. 948.63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 3145), and described below:

- (2) That any payrolls otherwise under this cootract required to be submitted for the above paried are sorrect and complete; that the wage rates for laborers or mechanics contained than the applicable wage rates contained in any wage determination incorporated into the contract; that
- (3) That any apprentices employed in the above period are duly registered in a boas fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State,

(4) That:

- (s) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FLINDS, OR PROGRAMS
- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fittings benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as
- (b) WHERE FRINGE BENEFITS ARE PAID IN CASH
- () Section 4(c) before.

(c) EXCEPTIONS

AMB AND TITLE SEGNATURE	EXCEPTION (Cnft)	EXPLANATION
AND TITLE SIGNATURE		
AMB AND TITLE SIGNATURE		
Anita S. Mixson, HR/Psyroll Manager	BIARIS	
NAME AND TITLE Anita S. Mixson, HR/Psyroll Manager SIGNATURE		
Anita S. Mixson, HR/Psyroll Manager		SIGNATURE / B

Pay Period Date: Week Ending: Payroll No: 03/16/24 03/16/24

Certified Payroll Report

Contract #: Job No: Job Nama: 1069 1069

HILTON HEAD AIRPORT EXPAN

BLUFFTON, SC 29910 843 987-0500

	# Exemptions				H	ours.									
Employee	Soulal Security Work Class	SUN	MON	TUE	WED	THU	FRI	SAT					eck Total	8	
JOHNSON, LAMIQUE D.	Ex: S-01 B M O	0.00	0.00	12	13	14	15	16	Total	Rate	Gross Pay	Deductions		Tat	de
	***-**-8942 S LABORER-GENERAL	0.00	0.00	0.00	0.00	00,0	0.00 3.00 Vacatio Holiday Sick Other J	ob Pay	0,00 3,00	0.00 18,00	0.00 54.00 0.00 0.00 0.00 0.00 0.00 54.00	Fed Wift FICA State W/H Local W/H Woomp/Sdl	54,69 65,26 30,13 0,00 0,00	Oross Taxes Deducts Add-Ons Net Pay Hours: Tex+Dest: Check #:	853,00 149,97 0.00 0.00 703,03 44,00 149,97 508829
SMITH, ZACHARY JORDAN	Ex: S-01 C M O ***-**-8451 S OPERATOR-BULLDOZE	0,00 0,00 R	0.00 10.00	0,00	0.00	0.00 10.00	5.00 0.00 Vacatio Holiday Sick Other J	ob Pay	5,00 40,00	37.50 25.00	187.50 1,000.00 0.00 0.00 0.00 0.00 1,187.50	Fed W/H FICA State W/H Local W/H Woomp/Sdll HEALTH INS DENTAL INS	137,99 96,20 53,44 0,00 0,00 35,49 13,94	Gross Taxess Deducts Add-One Net Pay Hours: Tax+Ded: Check #:	1,306.25 287.63 48.53 0,00 970.09 47.50 336.16 508876
TAYLOR, JARED NICOLAUS	Exc S-04 B M 0 ***-**-4257 8 OPERATOR-LOADER	0.00	0.00 9.00	0.00	0.00	0.00	6.50 1.00 Vacatio Holiday Sick Other J	ob Pay	6.50 40.00	34.50 23.00	224.25 920.00 0.00 0.00 0.00 0.00 0.00 1,144.25	Fed W/H FICA State W/H Local W/H Woomp/Sdl HEALTH INS DENTAL INS VISION INS	0.00 84.80 50.52 0.00 0.00 53,05 6.34 1.40	Gross Taxes Deducts Add-Ons Not Pay Hours: Tax+Ded: Check #:	1,169.25 135.32 60.75 0.00 973.14 46.50 196.11

Statement of Compliance

Date: MARCH 21, 2024

L Anita S. Mixson, HR/Payroll Manager do hereby state:

Contract Number: 1069

(1) That I pay or supervise the payment of the persons employed by CLELAND CONSTRUCTORS, INC. on the HILTON HEAD AIRPORT EXPAN, that during the payroll period commencing on the 10 day of MARCH, 2024 and ending the 16 day of MARCH, 2024, and that no rebates have been or will be made either directly to or on behalf of said CLELAND CONSTRUCTORS, INC. from the full weekly wages carned by any person amended (48 Stat. 948.63 Stat. 103, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 3145), and described below:

- (2) That any payrolls otherwise under this contract required to be submitted for the shove period are correct and complete; that the wage rates for laborers or machinics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the elaculfications set forth therein for each ishorer or mechanic conform with the work he performed.
- (3) That any apprentices employed in the above period are duly registered in a house fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State.
- (4) That:
 - (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS
 - In addition to the basic hourly wago rates paid to each laborer or machanic listed in the above referenced payroll, payments of fringe bennfits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(o) below.
 - (b) WHERE PRINGE 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

(c) EXCEPTIONS

EXCEPTION (Cnfl)	EXPLANATION
REMARKS	

Wage and Hour Division

PAYROLL



For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. OR SUBCONTRACTOR NAME OF CONTRACTOR ADDRESS 3820 GARMON MILL ROAD OMB No. 1235-0008 MIDLAND NC 28107 CARDINAL CONCRETE CORPORATION Expires 09/30/2026 PROJECT OR CONTRACT NO. PAYROLL NO. FOR WEEK ENDING PROJECT AND LOCATION
HILTON HEAD ISLAND AIRPORT TERMINAL 03/24/2024 **IMPROVEMENTS PHASE 1** 232932-CON08 (1) (2) (3) (4) DAY AND DATE (5) (6) (9) NO OF WITHHOLDING EXEMPTIONS DEDUCTIONS W TH S S M NET NAME AND INDIVIDUAL IDENTIFYING NUMBER GROSS WITH INSURANC WAGES 19 20 22 491K 18 21 23 24 (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY WORK TOTAL RATE HOLDING AMOUNT TOTAL PAID NUMBER) OF WORKER CLASSIFICATION HOURS WORKED EACH DAY HOURS OF PAY DEDUCTIONS FOR WEEK EARNED FICA TAX OTHER **RHANE FERGUSON 9200 OPERATOR** \$130.57 \$302,04 S216.33 \$76.92 \$725.86 0 \$1,197,22 20.00 Sa/aRy a tin 4 (4) 4 00 \$1,923.08 **JERRY COVINGTON 7412** TRUCK DRIVER \$607.50 3 \$46,48 \$5.00 \$44.86 \$96.34 \$511.16 11.50 1 00 22.50 27.00 0 0

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date3-26-2024		(b) WHERE EDINOS REVIETES ARE SAID IN OR	1011
BRIDGETTE ROWELL	PAYROLL	(b) WHERE FRINGE BENEFITS ARE PAID IN CA	NOT
(Name of Signatory Party)	(Title)	- Each laborer or mechanic listed	in the above referenced payroll has been paid,
do hereby state:	(1.13)	basic hourly wage rate plus the in the contract, except as noted	mount not less than the sum of the applicable amount of the required fringe benefits as listed in section 4(c) below
(1) That I pay or supervise the payment of the per	sons employed by		
CARDINAL CONCRETE	CORPORATION	(c) EXCEPTIONS	
(Contractor or Subcon		EXCEPTION (CRAFT)	EXPLANATION
HILTON HEAD ISLAND AIRPORT	; that during the payroll period commencing on the	ne	
(Building or Work) 18 day of MARCH 2024, and end	ting the 24 day of MARCH 2024	,	
all persons employed on said project have been paid the been or will be made either directly or indirectly to or or			
CARDINAL CONCRETE C	ORPORATION from the	full	
(Contractor or Subc			
3 (29 C.F.R. Subtitle A), issued by the Secretary of Lat 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3	(45), and described below:		
		REMARKS:	
correct and complete; that the wage rates for laborers applicable wage rates contained in any wage determina set forth therein for each laborer or mechanic conform	ntion incorporated into the contract; that the classific with the work he performed. Period are duly registered in a bona fide apprenticesh recognized by the Bureau of Apprenticeship and such recognized agency exists in a State, are registed	ne ations ip	
(4) That:			\cap
	TO APPROVED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE SIGNATURE S	GNATURE ()
		BRIDGETTE ROWELL PAYROLL	(i) . (/ 11 + 00
the above referenced payroll, p	rage rates paid to each laborer or mechanic listed payments of fringe benefits as listed in the contra- propriate programs for the benefit of such employee elow.	CT THE WILLFUL FALSIFICATION OF ANY OF THE AROVE STATES	RENTS MAY SUBJECT THE CONTRACTOR OR SECTION 1001 OF TITLE 18 AND SECTION 3729 OF

U.S. Department of Labor Wage and Hour Division

PAYROLL

PROJECT OH CONTRACT NO	HILTON HEAD ISLAND AIRPORT TERMINAL	FOR WEEK ENDING		PAYROLL NO
OMB No 1235-0008 Expires 09/30/2026	ADDRESS 89 POPILAR STREET GREAT FALLS, SC 29055	CASTILLOS LABOR LLC	OR BUBC	OR BUSCONTRACTOR CASTILLOS LA
Revised December 2008	Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.			
WASS AND HOLD DIVISION	For contractor's optional use; see instructions at doi.gov/agencies/whd/forms/wh347	For contractor's optional use; see I		Wage and Hour Division

CAS	STILLS	CASTILLOS LABOR LLC			GREAT F	GREAT FALLS, SC 29055	Si					Expres 09/30/2026	10/2026
PAYROLL NO		FOR WEEK ENDING	03/24/2024	MPRO S	HILTON HEAD ISLAND AIR	HILTON HEAD ISLAND AIRPORT TERMINAL	RT TERM	ANAL		PROJECT OH CONT 232932-COND8	PROJECT ON CONTRACT NO 232932-CON08	ON	
3	(2)	c)	(4) DAY AND DATE	IS)	(6)	171							4
	DING DNS		M T W TH F S S	- 1					DEDU	DEDUCTIONS			5
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGGTS OF SOCIAL SECURITY	CIF THE HOLE EMPTI	MOOR	18 19 20 21 22 23 24		RATE	GROSS		_	INSURAN	401 %		1010	WAGES
PENDADA AO PERBUTY	NO (VI EX	CLASSIFICATION	HOURS WORKED EAC	HOURS	QF PAY	EARNED	FICA	TAX	_		OTHER	25	FOR WEEN
RODOLFO CASTILLO 7626		FINISHER	0			/							
	-		18 AN 18 AN 18 AND	47.50		2,000							2,000
PEDRO JUAREZ 2457		FINISHER	0		250.00								
			* 6 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	47.5U	daily	1,250							1,250
DAMIAN SHAW 3417		OPERATOR			250.00								
			4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	47.5u	daily	/1.25d							1,250
GIOVANNI RESCINOS 5734		FINISHER	0		250.00	/							
			* * * * * * * * * * * * * * * * * * *	47.50	daily	1,250							1,250
MIGUEL ZAVALA 5463		LABORER	0		250.00	/							
			# V A 100	47.50	daily	1,250							1,250
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affill (2 f. § 2 d. c) and real members of the control of the cont

Public Bladden Statement

Any comments required the air preside to complete the collection, offsice plant to reviewing my funding, seal of no state of particular public delicities of any give stated of the collection of months of the collection of the collection of months of the collection o

	(3) That any apprentices employed in the above period are duly registered in a bone fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Depertment of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.	(2) That any psyrolis otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or 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 he performed.	REMARKS	weakly wages surred by any parson and that no deductions have bean made either directly or indirectly. from the full wages carried by any parson, other than permissible deductions as defined in Regulations. Part 3 (25 C F R. Submis A), Issued by the Servisary of Liboru runtin the Copaland Act as amended (48 Stat. 948, 83 Stat. 108, 72 Stat. 967; 76 Stat. 357, 40 U.S.C. § 3145), and described below.	(Contractor or Subcontractor)	CASTILLOS LABOR LLC	all persons employed on said project have been paid the full weekly wages earned, that no rebeles have been or will be made either directly or indirectly to or on behalf of said	(Building or Work) 18 day of MARCH 2024 and ending the 24 day of MARCH 2024	HILTON HEAD ISLAND AIRPORT : that during the payroll period commencing on the	on the	(1) That I pay or supervise the payment of the persons employed by	(Name of Signatory Party) (Title) (Title) (Title) (Title) (Title) (In the co	CHRISTINA CASTILLO PAYROLL	Date 3-26-2024 (b) WHERE FRINGE BEN	
CHRISTINA CASTILLO THE WILLFU: FALSFICATION OF ANY OF THE ABOVE STATEMENTS UBJ. ECT THE CONTRACTOR OR									(CRAFT)			cach reporter or mechanis, assed in the acover extensivacy payron has been pau, 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 confract, except as noted in section 4(c) below		(b) WHERE FRINGE BENEFITS ARE PAID IN CASH	

Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

TAX STATEMENT AND CERTIFICATION

Sworn and subscribed before me this 2nd day of April 20 24 NOTARY PUBLIC Lisa R. Wilbanks NOTARY PUBLIC Macklenburg County North Carolina NSFedhmission Expires June 28, 2026	are the subcontractors that are engaged by this Contractor in the performance of this Contract whose tax statements are also enclosed herewith. CONTRACTOR	(THE FOLLOWING PORTION TO BE FILLED OUT BY THE GENERAL CONTRACTOR ONLY) It is further certified that: Nothing to Report This Period	Carolina and Local Sales or Use Tax paid by the undersigned Contractor from March 1 20 24 to March 30 , 20 24, inclusive for the materials and equipment that were or will become a part of the construction of the: TERMINAL IMPROVEMENTS-Phase 1 — Hilton Head Island Airport, Hilton Head Island, SC	THIS IS TO CELLITA HIGH HIG TOLEBOHER OF AFFACTION STATEMENT IS A HIGH AND AND COMPLETE STATEMENT OF AN EXPENSE
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Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

STATE AND COUNTY SALES/USE TAX STATEMENT

Contractor (or Subcontractor's) Name_ Edison Foard, LLC

Job: TERMINAL IMPROVEMENTS - Phase 1 - Hilton Head Island Airport, Hilton Head Island, SC Sheet No. 1 of 2

INVOICE	INVOICE DATES	VENDOR'S NAME	TYPE OF MATERIAL	TOTAL AMOUNT OF INVOICE	SALES/USE TAX		
	FROM <u>3-1</u> 20 <u>24</u> THRU <u>3-30</u> 20 <u>24</u>			or invested	STATE %	COUNTY %	
	NOTHING TO REPORT THIS PERIOD						

SUBTOTAL THIS PAGE:

Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

TOTAL ALL INVOICES: NOTHING TO REPORT THIS PERIOD

Forms

Forms

Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

STATE AND COUNTY SALES/USE TAX STATEMENT

Contractor (or Subcontractor's) Name Cardinal Concrete Corporation		
Job: TERMINAL IMPROVEMENTS - Phase I - Hilton Head Island Airport, Hilton Head Island, SC Shee	t No c	of
INVOICE INVOICE DATES VENDOR'S NAME TYPE OF MATERIAL TOTAL AMOUNT OF INVOICE	SALES/	USE TAX
FROM 3 - \ 20 at	STATE %	COUNTY %
No sales tak this period		
SUBTOTAL THIS PAGE:	0	

C-3

Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

TOTAL ALL INVOICES:

Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

TAX STATEMENT AND CERTIFICATION

become a part of the construction of the: TERMINAL IMPROVEMENTS-Phase 1 — Hilton Head Island Airport, Hilton Head Island, SC (THE FOLLOWING PORTION TO BE FILLED OUT BY THE GENERAL CONTRACTOR ONLY) It is further certified that:	This is to certify that the foregoing or attached statement is a true and complete statement of all South Carolina and Local Sales or Use Tax paid by the undersigned Contractor from
	ged by this Contractor in the performance of this Superior Mechanical Syst Leonard Burch - Presiden
subcontractors that are engaged by this Contractor in the performance of this nts are also enclosed herewith. Superior Mechanical Syst	16th day of February 20_24 16th day of February 20_24 10th day of February 20_24 10

(SEAL)

Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

STATE AND COUNTY SALES/USE TAX STATEMENT

Contractor (or Subcontractor's) Name	Superior Mechanical Systems, Inc.

Job: TERMINAL IMPROVEMENTS - Phase 1 - Hilton Head Island Airport, Hilton Head Island, SC Sheet No. 1 of 1

INVOICE	INVOICE DATES	VENDOR'S NAME	TYPE OF MATERIAL	TOTAL AMOUNT OF INVOICE	SALES/USE TAX		
	FROM 1/16 2024 THRU 2/15 2024			Of hyvoleb	STATE %	COUNTY %	
146134	1/11/2024	ASC	MISC	3589.85	201.30	33.55	

SUBTOTAL THIS PAGE: 3589.85

Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

TOTAL ALL INVOICES: 3589.85

Forms



ASC Equipment Co. 5521 Cannon Drive, Suite 103 Monroe NC 28110 US P-704-543-9140 F-704-543-9240

INVOICE

No. 146134

JOB

41-5252

41-5252 Hilton Head Airport Terminal Improvements

Superior Mechanical Systems, SOLD TO

Charlotte NC 28206 Mguy@Superiormsinc.com

HILTON HEAD AIRPORT

CUSTOMER PO# REP

SHIP VIA BESTWAY

SHIP

1/11/2024 DATE 1/15/2024

TRACKING NO

Hilton Head Island SC 29926 120 Beach City Road Superior Mechanical Systems, SHIP TO

As of July 1, 2023 Chapman Company has changed our name to ASC Equipment Co.

AvaTax - Total Rate: 7.00 - SOUTH CAROLINA: 6.00; BEAUFORT COUNTY GREEN SPACE TAX: 1.00;	Invoice Sub-Total	Vibration Isolation Design (Non-Taxable)	Seismic Engineered Submittals (Non-Taxable)	DESCRIPTION
00; BEAUFORT COUNTY				
1.00	1.00	3.00	8.00	QTY R
	\$3,355.00 \$3,355.00			ATE
	\$3,355.00			AMOUNT

RECEIVED: 1/10/24

JOB#: 202403

ENTERED: 1/10/24

Hilton Flead Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

TAX STATEMENT AND CERTIFICATION

become a part of the construction of the: 20 24 to Carolina and Local Sales or Use Tax paid by the undersigned Contractor from . This is to certify that the foregoing or attached statement is a true and complete statement of all South TERMINAL IMPROVEMENTS-Phase 1 — Hilton Head Island Airport, Hilton Head Island, SC March 20 34 inclusive for the materials and equipment that were or will March

(THE FOLLOWING PORTION TO BE FILLED OUT BY THE GENERAL CONTRACTOR ONLY)

It is further certified that:

statements are also enclosed herewith. are the subcontractors that are engaged by this Contractor in the performance of this Contract whose tax

CONTRACTOR OR SUBCONTRACTOR

Sworn and subscribed before me this

20 34

NOTARY PUBLIC

TAMAYOTA POOLING TAMAYO

(SEAL)

Hilton Head Island Airport (HXD) Terminal Improvements ~ Phase 1 February 15, 2023

STATE AND COUNTY SALES/USE TAX STATEMENT

Contractor (or Subcontractor's) Name CLELAND CONSTRUCTORS, INC.

Job: TERMINAL IMPROVEMENTS - Phase 1 - Hilton Head Island Airport, Hilton Head Island, SC	Chaot Ma	6
Zeneral Timporta Timor Tread Island, SC	_ Sheet No	01

INVOICE	INVOICE DATES	VENDOR'S NAME	TYPE OF MATERIAL	TOTAL AMOUNT OF INVOICE	SALES/USE TAX		
	FROM 3/1 20 24 THRU 3/25 20 24			of haveled	STATE %	COUNTY %	
9486	3/1/24	Select Precast	concrete structures	15,408.00	6%	1%	
9526	3/6/24	Select Precast	concrete structures	9,353.94	6%	1%	

SUBTOTAL THIS PAGE: \$24,761.94

Hilton Head Island Airport (HXD) Terminal Improvements - Phase 1 February 15, 2023

TOTAL ALL INVOICES: \$24,761.94

******REQUEST FOR REIMBURSEMENT *******	EMENT ******* # 3
AIRPORT NAME: Hilton Head Island Airport	
SCAC NO: 23-029	DATE 06/28/2024
PROJECT DESC: Terminal Expansion	
AIP NUMBER: 3-45-0030-045-2020 AIP A	AIP AMOUNT:\$ 10,000,000
OTHER FUNDS:\$ 0.00 SCAC GRAN	SCAC GRANT AMOUNT:\$_12,000,000
PERCENT COMPLETED: 6	%
AMOUNT BILLED TO SPONSOR TO DATE:	\$ 3,037,675.92
AMOUNT PAID BY SPONSOR TO DATE:	\$ 3,037,675.92
AMOUNT BILLED TO STATE BY DATE:	\$ 530,991.59
AMOUNT PAID BY STATE TO DATE:	\$ 0.00
PAYMENT REQUESTED THIS APPLICATION: \$	\$ 150,389.84

appropriated to the sponsor for this project: and that the city, county, or authority has paid \$3,037,675.92 on the above project. (Include copies of all invoices, charges. cancelled checks, or been encumbered for the purpose of matching funds allocated by the SC Aeronautics Commission bank statements) for this project; and no other state funds will be used to match Aeronautics funds specifically This is to certify that the required local funds, a minimum of \$150,389.84 were on hand and have

Signature & Title of County, City, or Authority Representative

the contract documents to the South Carolina Aeronautics Commission. This is to certify that all materials have been received and/or all work was performed as specified in

Airports Director

/ Signature & Title	Title Title	
FOR AERONAUTICS USE ONLY		
AUDIT BY: Chris Eversmann	AMT OF GRANT \$	\$ 12,000,000.00
APPROVED FOR PAYMENT: 7/24/2024	TOTAL PAID \$	357,232.08
ACCOUNT ID. NO:	THIS REQUEST \$_	150,389.84
	AMT REMAINING \$ 11,492,378.08	\$ 11,492,378.08

Date: 06/28/2024 Airport: HILTON HEAD ISLAND AIRPORT

SCDOA NO: 23-029 Payment Request No. 4

	_	- /							_	
								AIP SHARE (See		
						INVOICE	Application of	AIP Share		
			CHECK/EFT			AMOUNT (See	FAA 86.19%	Summary Below		
PAYEE	DATE PAID	EFT#	AMOUNT	INVOICE NO.	INVOICE DATE	Summary Below)	Eligibility Ratio	86.1	SCAC	FULL DESC
Previously requested	I									
EDISON FOARD LLC	2/29/2024	25211	\$ 824,139.65	4-2119-1905	1/30/2024	\$ 774,639.65	\$ 667,644.60	\$ 600,880.14	173,759.51	HXD TERMINAL EXPANSION PROJECT PHASE 1
EDISON FOARD LLC	3/27/2024	25974	\$ 730,986.46	5-2119-1905	2/29/2024	\$ 730,986.46	\$ 630,020.90	\$ 567,018.81	163,967.65	HXD TERMINAL EXPANSION PROJECT PHASE 1
EDISON FOARD LLC	5/2/2024	26817	\$ 861,594.81	6-2119-1905	3/30/2024	\$ 861,594.81	\$ 742,589.31	\$ 668,330.38	193,264.43	HXD TERMINAL EXPANSION PROJECT PHASE 1
Requested this pay re	equest									
EDISON FOARD LLC	5/2/2024	27730	\$ 670,455.00	7-2119-1905	4/30/2024	\$ 670,455.00	\$ 577,850.18	\$ 520,065.16	150,389.84	HXD TERMINAL EXPANSION PROJECT PHASE 1
	İ									
Total of all past and	current pay req	uests				\$ 3,037,675.92			681,381.43	

Beaufort County, Beaufort, SC 29901-1228

04/30/2024

INVOICE NUMBER PAY APP#7 **HXD TERMINAL EXPANSION PROJECT PHASE 1** DESCRIPTION INVOICE AMOUNT \$670,455.00

PAGE: 1 OF 1

EFT NUMBER: 00027730

GL#:10001130 - 57130

\$670,455.00

VENDOR NOMBER	VHNCCX NAME		EFIDATE	EF AMOUN
16268	EDISON FOARD LLC	27730	06/06/2024	\$670,455.00



Beaufort County Finance

Vendor Number 16268

EFT Number 27730

EFT Date **06/06/2024**

Post Office Drawer 1228
Beaufort, South Carolina 29901-1228
(843) 255-2290

\$670,455.00

Pay *Six Hundred Seventy Thousand Four Hundred Fifty-five Dollars and 00 Cents*

To the EDISON FOARD LLC Order Of PO BOX 19888 CHARLOTTE, NC 28219-0888

NON-NEGOTIABLE



Beaufort County Finance
Post Office Drawer 1228
Beaufort, South Carolina 29901-1228
(843) 255-2290

ADDRESS SERVICE REQUESTED

EDISON FOARD LLC PO BOX 19888 CHARLOTTE, NC 28219-0888

Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

ESTIMATE FOR PARTIAL PAYMENT

	No:_7_
Owner's Project No.: IFB #041923	TBI Project No.: 2119-1905
Project Name: TERMINAL IMPROVEMENTS-Phase 1	
Contractor: Edison Foard, LLC	Contract Date: September 13, 2023
Application Date: April 25, 2024	For Period Ending: April 30, 2024
Original Contract Price:	\$30,898,447.83
Net Change Orders:	\$0.00
Current Contract Price:	\$30,898,447.83
Total Amount Earned (Col. 9):	\$4,495,186.47
Retained Percentage (10 %):	\$449,518.65
Total Earned Less Retained:	\$4,045,667.82
Total Previously Approved:	\$3,375,212.82
Amount Due This Estimate:	\$670,455.00

CERTIFICATE OF CONTRACTOR

Total Amount Due:

\$670,455.00

incurred by the undersigned in connection with work covered by prior estimates for partial payment; and that all materials and equipment incorporated in the above project are free and clear of all liens, security interests and encumbrances. changes thereto; that the above is a true and correct statement of the contract up to and including the last day of the period of the estimate; that all The undersigned certifies to the best of his knowledge and belief that all items, units, quantities and prices for work and material herein are correct; that all work has been performed and materials supplied in accordance with the terms and conditions of the Construction Contract and all authorized previous payments received from the Owner for work performed under the Construction Contract have been applied to discharge all obligations

Ву: Contractor: Nicholas Roberts Date: Title: May 16, 2024 Project Manager

CERTIFICATE OF OWNER'S ENGINEERS

work performed materials supplied under the Contract. I certify that I have verified this Estimate for Partial Payment and that to the best of my knowledge and belief it is a true and correct statement of

TALBERT, BRIGHT & Ellington, INC., COLUMBIA, SOUTH CAROLINA

Project Engi

Young Waller Tomo

Resident Observer

Thomas A Mullen

BY: Jon Rembold TITLE: Airport Director DATE: 5/23/2024	OWNER'S RECOMMENDATION FOR PAYMENT Approved and Payment Recommended:
	, OWNER

Forms C-1

TOTALS

NET CHANGES by Change Order

Application and Certificate for Payment

Applicant	on and octanicate for i	aymont				
TO OWNER:	Hilton Head Island Airport PO Drawer 1228 Beaufort, SC 29901	PROJECT:	HHIA Terminal Imp 120 Beach City R Hilton Head Island		APPLICATION NO: 007 PERIOD TO: April 30, 2024 CONTRACT FOR: General Cons	Distribution to: OWNER: struction ARCHITECT:
FROM CONTRACTOR:	Edison Foard, LLC PO Box 19888 Charlotte, NC 28219	VIA ARCHITECT:	The Wilson Group A PO Box 5510 Charlotte, NC 2829		CONTRACT DATE: September 1 PROJECT NOS: / 23-293	3, 2023
Application is ma	TOR'S APPLICATION FOR adde for payment, as shown below, in continuation Sheet, is attached.	onnection with the Co	ntract.	information and completed in acco	belief the Work covered by the ordance with the Contract Document	e best of the Contractor's knowledge, nis Application for Payment has been ments, that all amounts have been paid
1. ORIGINAL CON 2. NET CHANGE E	NTRACT SUMBY CHANGE ORDERS		\$30,898,447.83 \$0.00	payments received		ertificates for Payment were issued and ent payment shown herein is now due.
	JM TO DATE (Line 1 ± 2)		\$30,898,447.83 \$4,495,186.47			Date: May 16, 2024 LISA R. WILBANKS
a. 10.00 % (Column D b. 10.00 % (Column F	, and the second	\$27	,718.65 ,800.00	Subscribed and swo me this 1 by de Notary Public:	in to before ay of May, 2024. Law G. Willianks	NOTARY PUBLIC Mecklenburg County North Carolina My Commission Expires June 28, 20
·	ge (Lines 5a + 5b or Total in Column I D LESS RETAINAGE		\$449,518.65 \$4,045,667.82	ADOLUTEOTIC	S CERTIFICATE FOR PA	YMENT
7. LESS PREVIOU	ss Line 5 Total) JS CERTIFICATES FOR PAYMENT om prior Certificate)		\$3,375,212.82	comprising this and Architect's knowled quality of the Wor	pplication, the Architect certifie edge, information and belief the rk is in accordance with the Cor	ed on on-site observations and the data es to the Owner that to the best of the Work has progressed as indicated, the tract Documents, and the Contractor is
	MENT DUE		\$670,455.00		nt of the AMOUNT CERTIFIED	
(Line 3 les	· ·	\$26,852	,780.01	(Attach explanation		
CHANGE ORDI		ADDITIONS	DEDUCTIONS	ARCHITECT:	mabbles Pour	E 100 10 A
	proved in previous months by Owner	\$0.00		Ву: \ 72	my value ana	Date: 5/20/24
Total approved the	his Month TOTALS	\$0.00		This Certificate is r	not negotiable. The AMOUNT CEI	RTIFIED is payable only to the Contractor

\$0.00

\$0.00

so.00 named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.



Continuation Sheet

AIA Document G702®, Application and Certification for Payment, or G732™, Application and Certificate for Payment, Construction Manager as Adviser Edition, containing Contractor's signed certification is attached.

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

APPLICATION NO:
APPLICATION DATE:
PERIOD TO:

007 April 25, 2024 April 30, 2024

ARCHITECT'S PROJECT NO:

23-2932 HHIA Terminal Improvements

A	В	С	D	E	F	G		Н	I
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	WORK CO FROM PREVIOUS APPLICATION (D + E)	MPLETED THIS PERIOD	MATERIALS PRESENTLY STORED (NOT IN D OR E)	TOTAL COMPLETED AND STORED TO DATE (D + E + F)	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
001	Mobilization	355,962.60	88,991.00	0.00	0.00	88,991.00	25.00%	266,971.60	8,899.10
002	Contractor Quality Control Program	25,000.00	0.00		0.00		0.00%	25,000.00	
003	Construction Entrance	15,229.20			0.00		100.00%	0.00	1,522.92
004	Silt Fence	12,672.00	10,531.20		0.00		83.11%		1,053.12
005	Tree Protection Fencing	45,761.20	37,090.14	0.00	0.00	37,090.14	81.05%	8,671.06	
006	Concrete Washout	1,428.00	1,428.00	0.00	0.00	1,428.00	100.00%	0.00	142.80
007	Seeding	8,452.50	0.00	0.00	0.00	0.00	0.00%	8,452.50	
008	Rock Check Dams	3,458.70	0.00	0.00	0.00	0.00	0.00%	3,458.70	
009	Inlet Protection	5,926.20	0.00	0.00	0.00	0.00	0.00%	5,926.20	0.00
010 011	Temporary Fence - Bioretention Swale Sediment Tubes	76,256.25 1,121.40		0.00	0.00	0.00 841.05	0.00% 75.00%	76,256.25 280.35	0.00 84.11
	1.5" Thick Asphalt Milling	29,865.60			0.00	0.00	0.00%	29,865.60	0.00
013	Asphalt Removal	64,032.00	883.00	0.00	0.00	883.00	1.38%	63,149.00	88.30
014	Asphalt Pavement Removal - Airside, Any Thickness Concrete Removal -	4,578.40	0.00	0.00	0.00	0.00	0.00%	4,578.40	0.00
015	Landside and Airside	48,266.40	48,226.40	0.00	0.00	48,226.40	99.92%	40.00	4,822.64
016	Concrete Pavement Removal - Airside, Any Thickness	10,662.75	0.00	0.00	0.00	0.00	0.00%	10,662.75	0.00
017	Remove Pipe Bollard	507.15	507.15	0.00	0.00	507.15	100.00%	0.00	50.72
018	12-inch Diameter	70,052.25	0.00	0.00	0.00	0.00	0.00%	70,052.25	0.00

A	В	С	D	Е	F	G		Н	I
			WORK CO	MPLETED	MATERIALS	TOTAL			
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	PRESENTLY STORED (NOT IN D OR E)	COMPLETED AND STORED TO DATE	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
	Scheduled 80 PVC Storm Drain - Airside								
019	Storm Drain Cleanout in Pavement and Grass Areas	6,860.70	0.00	0.00	0.00	0.00	0.00%	6,860.70	0.00
020	6-inch Diameter Schedule 80 PVC Storm Drain - Airside	9,243.00	0.00	0.00	0.00	0.00	0.00%	9,243.00	0.00
021	4-inch Diameter Schedule 80 PVC Storm Drain - Airside	3,082.00	0.00	0.00	0.00	0.00	0.00%	3,082.00	0.00
022	Storm Drainage Manhole	7,324.80	0.00	0.00			0.00%	7,324.80	
023	Temporary SIDA Fence	92,373.75	38,792.25	0.00	0.00	38,792.25	41.99%	53,581.50	3,879.23
024	Temporary Construction Fence	25,830.00	33,222.00	0.00	0.00	33,222.00	128.62%	-7,392.00	3,322.20
025	Temporary 24-foot Wide Manual Double Swing Gate	4,200.00	2,100.00	0.00	0.00	2,100.00	50.00%	2,100.00	210.00
026	Remove Chain Link Fence, Any Height	2,142.00	2,184.00	0.00	0.00	2,184.00	101.96%	-42.00	218.40
	Remove Chain Link Sliding Gate and All Related Appurtenances, Any Size	1,575.00	1,575.00	0.00	0.00	1,575.00	100.00%	0.00	157.50
	New 8-Ft Chain Link Fence with 3 Strands Barbed Wire-Black Coated	15,356.25	0.00	0.00	0.00	0.00	0.00%	15,356.25	0.00
	Pavement Marking Removal - Airside - Any Color on Any Pavement	31,570.00	0.00	0.00	0.00	0.00	0.00%	31,570.00	0.00
	Pavement Marking -	4,112.50		0.00			0.00%		

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User Notes:

Α	В	С	D	E	F	G		Н	I
			WORK CO	MPLETED	MATERIALS	TOTAL			
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	PRESENTLY STORED (NOT IN D OR E)	COMPLETED AND STORED TO DATE	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
	Reflectorized White								
031	Pavement Marking - Non-Reflectorized White	7,752.00	0.00	0.00	0.00	0.00	0.00%	7,752.00	0.00
032	Pavement Marking - Reflectorized Yellow	6,985.60	0.00	0.00	0.00	0.00	0.00%	6,985.60	0.00
033	Pavement Marking - Non-Reflectorized Yello	361.20	0.00	0.00	0.00	0.00	0.00%	361.20	0.00
034	Pavement Marking - Reflectorized Red	6,960.00	0.00	0.00	0.00	0.00	0.00%	6,960.00	0.00
035	Pavement Marking - Non-Reflectorized Red	484.90	0.00	0.00	0.00	0.00	0.00%	484.90	0.00
036	Pavement Marking - Black	19,216.80	0.00	0.00	0.00	0.00	0.00%	19,216.80	0.00
	Waterline Demolition & Removal	10,242.80	0.00	0.00	0.00		0.00%		
038	Misc Demolition	23,679.60	0.00	0.00	0.00		0.00%	23,679.60	
	Tree Removal	231,739.20	231,739.20	0.00			100.00%		23,173.92
040	Conduit Removal	5,250.00	0.00	0.00	0.00	0.00	0.00%	5,250.00	0.00
041	Embankment in Place - Import Fill - Airside	66,805.00	0.00	0.00	0.00	0.00	0.00%	66,805.00	0.00
042	Unsuitable Excavation - Airside	17,400.00	0.00	0.00	0.00		0.00%		
	Stripping Topsoil	58,815.90	62,620.43	0.00	0.00		106.47%		
	Cut to Fill - Landside	13,473.00	0.00	0.00	0.00		0.00%	13,473.00	
045	Import Fill Material	219,810.00	367,470.60	0.00	0.00		167.18%		
	Muck & Fill	66,286.00	0.00	0.00			0.00%		
	Fine Grading	181,428.00	0.00	0.00			0.00%		
	Storm Drain Grate Inlet	23,868.60	0.00	0.00	0.00	0.00	0.00%	23,868.60	0.00
	Storm Drain Bubbler Box	91,459.68	22,864.92	0.00	0.00	22,864.92	25.00%	68,594.76	2,286.49
050	Yard Inlet with Domed Grate	41,296.50	0.00	0.00	0.00	0.00	0.00%	41,296.50	0.00

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User Notes:

A	В	С	D	Е	F	G		Н	I
			WORK CO	MPLETED	MATERIALS	TOTAL			
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	PRESENTLY STORED (NOT IN D OR E)	COMPLETED AND STORED TO DATE	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
0.54	Rip Rap Over Filter	25.000.00	2.22	2.22		0.00	0.000/	27.000.00	
051	Fabric	27,080.00		0.00			0.00%		
052	15" RCP	15,228.18		0.00			0.00%		
053	18" RCP	32,677.75	0.00	0.00			0.00%		
054	Concrete Flumes	17,360.10	0.00	0.00	0.00	0.00	0.00%	17,360.10	0.00
055	12" Perforated Underdrain with Stone Trench	55,033.24	0.00	0.00	0.00	0.00	0.00%	55,033.24	0.00
056	Core Existing Outlet Box for Underdrain Connection	4,060.35	0.00	0.00	0.00	0.00	0.00%	4,060.35	0.00
057	Roof Drainage Collection System	266,332.50	0.00	0.00	0.00	0.00	0.00%	266,332.50	0.00
058	Bioretention / Bioswale Soil Media Construction	125,703.50	0.00	0.00	0.00	0.00	0.00%	125,703.50	0.00
	2" Asphalt Surface Course - Landside	227,640.00	0.00	0.00	0.00	0.00	_ 0.00%	227,640.00	0.00
	8" Aggregate Base Course - Landside	212,730.00	0.00	0.00			0.00%	212,730.00	
061	Tack Coat - Landside	10,092.00	0.00	0.00	0.00	0.00	0.00%	10,092.00	0.00
062	Concrete Curb - Landside	66,845.70	0.00	0.00	0.00	0.00	0.00%	66,845.70	0.00
063	Concrete Pavers - Landside	108,023.10	0.00	0.00	0.00	0.00	0.00%	108,023.10	0.00
	6" Thick Portland Cement Concrete Pavement	292,748.70	0.00	0.00	0.00	0.00	0.00%	292,748.70	0.00
065	6" Thick Portland Cement Concrete Pavement (Reinforced)	127,180.20	0.00	0.00	0.00	0.00	0.00%	127,180.20	0.00
066	8" Thick Portland Cement Concrete Pavement	30,968.30	0.00	0.00	0.00	0.00	0.00%	30,968.30	0.00

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User Notes:

A	В	С	D	Е	F	G		Н	I
			WORK CO	MPLETED	MATERIALS	TOTAL	-		
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	PRESENTLY STORED (NOT IN D OR E)	COMPLETED AND STORED TO DATE	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
	8" Thick Portland								
	Cement Concrete								
067	Pavement (Reinforced)	8,195.50	0.00	0.00	0.00	0.00	0.00%	8,195.50	0.00
0.50	Bituminous Base	460.011.55		2.22		0.00	0.000/		
068	Course	469,211.55	0.00				0.00%	469,211.55	
	Bituminous Tack	4,485.00	0.00	0.00	0.00	0.00	0.00%	4,485.00	0.00
	4" Concrete Sidewalk -	77 533 30	0.00	0.00	0.00	0.00	0.000/	33 502 20	0.00
070	Landside 4" Concrete Sidewalk -	77,523.38	0.00	0.00	0.00	0.00	0.00%	77,523.38	0.00
071	Airside	11,522.50	0.00	0.00	0.00	0.00	0.00%	11 522 50	0.00
	4" Concrete Pad for	11,322.30	0.00	0.00	0.00	0.00	0.00%	11,522.50	0.00
	Bike Racks	3,472.00	0.00	0.00	0.00	0.00	0.00%	3,472.00	0.00
072	4" Oyster Shell	3,472.00	0.00	0.00	0.00	0.00	0.0070	3,472.00	0.00
073	Concrete Walkway	58,287.90	0.00	0.00	0.00	0.00	0.00%	58,287.90	0.00
	Internally Pigmented			V 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				00,207.50	
074	Concrete Crosswalks	173,166.00	0.00	0.00	0.00	0.00	0.00%	173,166.00	0.00
075	Concrete Wheelstop	7,969.50	0.00	0.00	0.00	0.00	0.00%	7,969.50	0.00
076	Handicap Ramps with Detectable Warnings	28,933.54	0.00	0.00	0.00	0.00	0.00%	28,933.54	0.00
070	6" Concrete Dumpster	20,733.34	0.00	0.00	0.00	0.00	0.0070	20,755.54	0.00
077	Pad	19,674.95	0.00	0.00	0.00	0.00	0.00%	19,674.95	0.00
	Wood Dumpster								0.00
078	Enclosure	144.90	0.00	0.00	0.00	0.00	0.00%	144.90	0.00
	Striping, Signage &								
	Marking	22,641.15	0.00	0.00	0.00	0.00	0.00%	22,641.15	0.00
	Tie-in to Existing								
080	Waterline	17,947.65	0.00	0.00	0.00	0.00	0.00%	17,947.65	0.00
081	10" PVC Water Line	56,838.40	0.00	0.00	0.00	0.00	0.00%	56,838.40	0.00
082	6" PVC Water Line	239.40	0.00	0.00	0.00		0.00%	239.40	0.00
	6" PVC Fire Line	11,010.90	0.00	0.00	0.00		0.00%	11,010.90	0.00
084	Free-Standing FDC	16,842.00	0.00	0.00	0.00		0.00%	16,842.00	0.00
085	2" Water Lateral	1,536.50	0.00	0.00	0.00	0.00	0.00%	1,536.50	0.00
086	2.5" Water Lateral	628.32	0.00	0.00	0.00	0.00	0.00%	628.32	0.00

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A	В	С	D	Е	F	G		Н	I
ITEM	DESCRIPTION OF	SCHEDULED	WORK CO FROM	MPLETED	MATERIALS PRESENTLY	TOTAL COMPLETED AND	%	BALANCE TO	RETAINAGE
NO.	WORK	VALUE	PREVIOUS APPLICATION (D + E)	THIS PERIOD	STORED (NOT IN D OR E)	STORED TO DATE (D + E + F)	(G÷C)	FINISH (C - G)	(IF VARIABLE RATE)
087	Fire Hydrants	9,028.92	0.00	0.00	0.00	0.00	0.00%	9,028.92	0.00
088	Valves, Fittings & RPZS	85,335.60	0.00	0.00	0.00	0.00	0.00%	85,335.60	0.00
089	Water Testing	15,252.30	0.00	0.00	0.00	0.00	0.00%	15,252.30	0.00
090	Connect to Existing Sewer Manhole	10,285.80	0.00	0.00	0.00	0.00	0.00%	10,285.80	0.00
091	Standard Manhole	18,591.30	0.00	0.00	0.00	0.00	0.00%		
092	8" Sewer Line	30,729.46	0.00	0.00	0.00	0.00	0.00%		
093	6" Sewer Lateral with Cleanouts	8,023.00	0.00	0.00	0.00	0.00	0.00%		
	Sewer Testing	5,909.40	0.00	0.00	0.00	0.00	0.00%		
	2" Diameter Schedule 80 PVC Conduit	126,549.00	0.00	0.00	0.00	0.00	0.00%		0.00
	2" Diameter Schedule 80 PVC Conduit								
096	Directional Bore	7,442.25	0.00	0.00	0.00	0.00	0.00%		
097	Handhole	5,698.35	0.00	0.00	0.00	0.00	0.00%	5,698.35	0.00
098	Terminal Renovation & Expansion	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
099	Gate 1 Counter Inserts (Allowance No. 1)	7,000.00	0.00	0.00	0.00	0.00	0.00%	7,000.00	0.00
100	Gate 2 Counter Inserts (Allowance No. 2)	7,000.00	0.00	0.00	0.00	0.00	0.00%	7,000.00	0.00
101	Temporary Signage (Allowance No. 3)	10,000.00	0.00	0.00	0.00	0.00	0.00%	10,000.00	0.00
	Plan Review, Bldg. Permit, Utility, Tap & Misc Fees (Allowance								
	No. 4)	125,000.00	0.00	0.00	0.00	0.00	0.00%	125,000.00	0.00
	Soil Testing for Percolation Rates & Composition			V					
103	Adjustment (Allowance	10,000.00	0.00	0.00	0.00	0.00	0.00%	10,000.00	0.00

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User Notes:

A	В	С	D	Е	F	G		Н	I
			WORK CO FROM	MPLETED	MATERIALS	TOTAL		BALANCE TO	RETAINAGE
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	PREVIOUS APPLICATION (D + E)	THIS PERIOD	PRESENTLY STORED (NOT IN D OR E)	COMPLETED AND STORED TO DATE (D + E + F)	% (G÷C)	FINISH (C - G)	(IF VARIABLE RATE)
	No. 5)								
104	Cost to Move TSA and LEO Offices (Allowance No. 6)	200,000.00	0.00	0.00	0.00	0.00	0.00%	200,000.00	0.00
105	Fine Grading - Landscaping	3,150.00	0.00	0.00	0.00	0.00	0.00%	3,150.00	0.00
	Soil Amendments -					=			
106	Landscaping	682.50	0.00	0.00			0.00%		
107	Herbicide	367.50	0.00	0.00	0.00	0.00	0.00%	367.50	0.00
	Landscaping with Required Irrigation System Complete per			0.00			0.000/	(0.000.0F	0.00
108	Plan	69,823.37	0.00	0.00	0.00	0.00	0.00%	69,823.37	0.00
109	SOD, Zoysia Japonica 'Zeon', Korean Grass	9,680.00	0.00	0.00	0.00	0.00	0.00%	9,680.00	0.00
110	Phase 1 - Year 1 Maintenance	2,100.00	0.00	0.00	0.00	0.00	0.00%	2,100.00	0.00
111	Phase 1 - Year 2 Maintenance	2,100.00	0.00	0.00	0.00	0.00	0.00%	2,100.00	0.00
112	Phase 1 - Year 3 Maintenance	2,100.00	0.00	0.00	0.00	0.00	0.00%	2,100.00	0.00
113	Phase 2 - Year 1 Maintenance	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
114	Phase 2 - Year 2 Maintenance	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
115	Phase 2 - Year 3 Maintenance	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
116	Phase 6 - Year 1 Maintenance	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
117	Phase 6 - Year 2 Maintenance	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
118	Phase 6 - Year 3 Maintenance	0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00

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Α	В	С	D	Е	F	G		Н	I
			WORK CO	MPLETED	MATERIALC	TOTAL	-		
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	MATERIALS PRESENTLY STORED (NOT IN D OR E)	COMPLETED AND STORED TO DATE	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
119	Reduced Pressure Principle Backflow Preventer Cover	2,940.00	0.00	0.00	0.00	0.00	0.00%	2,940.00	0.00
120	5-Luminaire LED Apron Floodlight Pole with 50-Ft Mtg Height, Complete	80,000.00	0.00	0.00	0.00	0.00	0.00%	80,000.00	0.00
121	Reinforced Concrete Transformer Pad	10,678.50	0.00	0.00	0.00	0.00	0.00%	10,678.50	0.00
122	Reinforced Concrete Generator Pad	3,150.00	0.00	0.00	0.00		0.00%		0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
	Terminal Renovation & Expansion	0.00	0.00	0.00	0.00	0.00	0.00%		0.00
201	Furniture - Allowance	257,638.54	0.00	0.00	0.00	0.00	0.00%	257,638.54	0.00
202	Gate Counter Insert - Allowance	7,000.00	0.00	0.00	0.00	0.00	0.00%	7,000.00	0.00
203	Bonds / Insurance / License	370,000.00	370,000.00	0.00	0.00		100.00%		37,000.00
204	General Conditions	1,993,000.00	864,784.93	50,000.00	0.00		45.90%	1,078,215.07	91,478.49
205	Temporary Construction	284,000.00	60,000.00	8,000.00	0.00		23.94%	216,000.00	6,800.00
206	Scheduling	54,000.00	24,200.00	1,350.00	0.00		47.31%		2,555.00
207	Selective Demolition	140,000.00	112,000.00	0.00	0.00	112,000.00	80.00%	28,000.00	11,200.00
208	Soil Modification	59,000.00	0.00	0.00	0.00	0.00	0.00%	59,000.00	0.00
209	Concrete - General Conditions	129,000.00	12,000.00	27,000.00	0.00	39,000.00	30.23%	90,000.00	3,900.00
210	Concrete - Foundations	596,000.00	90,000.00	297,400.00	0.00		65.00%		38,740.00
211	Concrete - SOG	483,000.00	0.00	0.00	0.00		0.00%		0.00
212	Concrete - SOD	66,000.00	0.00	0.00	0.00		0.00%	66,000.00	0.00
213	Concrete - Steps / Ramp	38,000.00	0.00	0.00	0.00		0.00%	38,000.00	0.00
214	Masonry	167,000.00	0.00	33,500.00	0.00	33,500.00	20.06%	133,500.00	3,350.00
215	Structural Steel - Bonding	30,000.00	30,000.00	0.00	0.00	30,000.00	100.00%	0.00	3,000.00

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			WORK CO	MPLETED	MATERIALO	TOTAL			
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	MATERIALS PRESENTLY STORED (NOT IN D OR E)	COMPLETED AND STORED TO DATE (D + E + F)	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
216	Structural Steel - Detailing	117,000.00	94,000.00	12,500.00	0.00	106,500.00	91.03%	10,500.00	10,650.00
217	Structural Steel - Fabricated - Material	1,735,000.00	445,000.00	35,000.00	0.00	480,000.00	27.67%	1,255,000.00	48,000.00
218	Miscellaneous Iron - Fabricated - Material	83,000.00	0.00	0.00	0.00	0.00	0.00%	83,000.00	0.00
219	Metal Decking - Material	320,000.00	0.00	0.00	0.00	0.00	0.00%		0.00
220	Steel Erection	919,000.00	0.00	0.00	0.00	0.00	0.00%		0.00
221	Light Guage Truss	6,000.00	0.00	0.00	0.00	0.00	0.00%		0.00
222	Non-Ferrous Metals	47,000.00	0.00	0.00	0.00	0.00	0.00%		0.00
223	Rough Hardware	16,000.00	0.00	0.00	0.00	0.00	0.00%		0.00
224	Rough Carpentry	42,000.00	0.00	0.00	0.00	0.00	0.00%		0.00
225	PVC Brackets	17,000.00	0.00	0.00	0.00	0.00	0.00%	17,000.00	0.00
226	Casework	351,000.00	0.00	0.00	0.00	0.00	0.00%	351,000.00	0.00
227	Finish Carpentry	69,000.00	0.00	0.00	0.00	0.00	0.00%	69,000.00	0.00
228	Air Barrier	11,000.00	0.00	0.00	0.00	0.00	0.00%	11,000.00	0.00
229	Metal Roofing	1,533,000.00	0.00	115,000.00	0.00	115,000.00	7.50%	1,418,000.00	11,500.00
230	Membrane Roofing	62,000.00	0.00	0.00	0.00	0.00	0.00%	62,000.00	0.00
231	Cement Siding	282,000.00	0.00	0.00	0.00	0.00	0.00%	282,000.00	0.00
232	Sealants / Firestopping	28,000.00	0.00	0.00	0.00	0.00	0.00%	28,000.00	0.00
233	EJ Covers	8,000.00	0.00	0.00	0.00	0.00	0.00%	8,000.00	0.00
234	Hollow Metal Doors	87,000.00	0.00	0.00	0.00	0.00	0.00%	87,000.00	0.00
235	Wood Doors	21,000.00	0.00	0.00	0.00	0.00	0.00%	21,000.00	0.00
236	Coiling Grilles	71,000.00	0.00	0.00	0.00	0.00	0.00%	71,000.00	0.00
237	Storefront - Framing - Material	481,000.00	0.00	0.00	0.00	0.00	0.00%	481,000.00	0.00
	Storefront - Glazing -								
238	Material	259,000.00	0.00	0.00	0.00	0.00	0.00%		0.00
239	Frit Graphic	13,000.00	0.00	0.00	0.00	0.00	0.00%		0.00
240	Automatic Doors	35,000.00	0.00	0.00	0.00	0.00	0.00%	, , , , , , , , , , , , , , , , , , , ,	0.00
241	Finish Hardware	153,000.00	0.00	0.00	0.00	0.00	0.00%	153,000.00	0.00

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			WORK CO	MPLETED	MATERIALS	TOTAL			
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242	Stucco	131,000.00	0.00	0.00	0.00	0.00	0.00%	131,000.00	0.00
243	Drywall - Framing	768,000.00	0.00	0.00	0.00	0.00	0.00%	768,000.00	0.00
244	Drywall - Insulation	43,000.00	0.00	0.00	0.00	0.00	0.00%	43,000.00	0.00
245	Drywall - GWB	473,000.00	0.00	0.00	0.00	0.00	0.00%	473,000.00	0.00
246	Drywall - Finishing	201,000.00	0.00	0.00	0.00	0.00	0.00%	201,000.00	0.00
247	Glass Reinforced Gypsum	158,000.00	0.00	0.00	0.00		0.00%		0.00
248	Ceramic Tile	85,000.00	0.00	0.00	0.00		0.00%		0.00
249	Terrazzo	472,000.00	0.00	0.00	0.00		0.00%		0.00
250	Acoustical Ceilings	289,000.00	0.00	0.00	0.00		0.00%		0.00
251	Resilient Tile / Carpet	104,000.00	0.00	0.00	0.00		0.00%		0.00
252	Painting / Coatings	235,000.00	0.00	0.00	0.00		0.00%		0.00
253	Toilet Partitions	37,000.00	0.00	0.00	0.00		0.00%		0.00
254	Corner Guards	2,000.00	0.00	0.00	0.00		0.00%		0.00
255	Flagpoles	11,000.00	0.00	0.00	0.00		0.00%		0.00
256	Signage	54,000.00	0.00	0.00	0.00	0.00	0.00%	54,000.00	0.00
257	Flight Information Displays	47,000.00	0.00	0.00	0.00		0.00%		0.00
258	Lockers	4,000.00	0.00	0.00	0.00	0.00	0.00%	4,000.00	0.00
259	Fire Protection Specialties	3,000.00	0.00	0.00	0.00		0.00%	.,	0.00
260	Awnings	4,000.00	0.00	0.00	0.00		0.00%	4,000.00	0.00
261	Toilet Accessories	12,000.00	0.00	0.00	0.00		0.00%	12,000.00	0.00
262	Rooftop Screens	48,000.00	0.00	0.00	0.00		0.00%	48,000.00	0.00
263	Maintenance Equipment	39,000.00	0.00	0.00	0.00	0.00	0.00%	39,000.00	0.00
254	Audio Visual	20,000,00	0.00	0.00	0.00	0.00	0.000/	20,000,00	0.00
264	Equipment	30,000.00	0.00	0.00	0.00		0.00%	30,000.00	0.00
265	Pedestrian Controls	112,000.00	0.00	0.00	0.00		0.00%	112,000.00	0.00
266	Kitchen Appliances	2,000.00	0.00	0.00	0.00	0.00	0.00%	2,000.00	0.00
267	Gate Equipment - Alternate 1A	1,402,000.00	0.00	0.00	0.00		0.00%	1,402,000.00	0.00
268	Gate Equipment -	1,414,000.00	42,974.00	0.00	0.00	42,974.00	3.04%	1,371,026.00	4,297.40

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			WORK CO	MPLETED	MATERIALS	TOTAL		DALANCE TO	DETABLACE
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	Alternate 1B (Allowance)								
269	Fire Protection - Design	15,000.00	3,000.00	0.00	0.00	3,000.00	20.00%	12,000.00	300.00
270	Fire Protection	332,000.00	0.00	0.00	0.00	0.00	0.00%	332,000.00	0.00
271	Plumbing - Underground - Material	25,000.00	0.00	0.00	0.00	0.00	0.00%	25,000.00	0.00
272	Plumbing - Underground - Labor	54,000.00	0.00	0.00	0.00	0.00	0.00%	54,000.00	0.00
273	Plumbing - Drain, Waste, Vent - Material	40,000.00	0.00	0.00	0.00	0.00	0.00%	40,000.00	0.00
274	Plumbing - Water - Material	58,000.00	0.00	0.00	0.00	0.00	0.00%	58,000.00	0.00
275	Plumbing - Wall Rough - Labor	254,000.00	0.00	0.00	0.00	0.00	0.00%	254,000.00	0.00
276	Plumbing - Insulation	38,000.00	0.00	0.00	0.00	0.00	0.00%	38,000.00	0.00
277	Plumbing - Fixtures - Material	33,000.00	0.00	0.00	0.00	0.00	0.00%	33,000.00	0.00
278	Plumbing - Fixtures - Labor	23,000.00	0.00	0.00	0.00	0.00	0.00%	23,000.00	0.00
279	HVAC - General Conditions	435,000.00	25,000.00	0.00	0.00	25,000.00	5.75%	410,000.00	2,500.00
	HVAC - Split System - Material	267,000.00	0.00	0.00	243,000.00	243,000.00	91.01%	24,000.00	24,300.00
281	HVAC - Split System - Labor	41,000.00	0.00	0.00	0.00	0.00	0.00%	41,000.00	0.00
	HVAC - High Volume Low Speed Exhaust Fans - Material	42,000.00	0.00	0.00	0.00		0.00%	42,000.00	
	HVAC - High Volume Low Speed Exhaust								
283	Fans - Labor	19,000.00	0.00	0.00	0.00		0.00%		
	HVAC - Wall Heaters	17,000.00	0.00	0.00	0.00		0.00%	17,000.00	1
285	HVAC - Exhaust Fans	14,000.00	0.00	0.00	0.00	0.00	0.00%	14,000.00	0.00

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User Notes:

A	В	С	D	Ė	F	G		Н	I
			WORK CO	MPLETED	MATERIALO	TOTAL			
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	MATERIALS PRESENTLY STORED (NOT IN D OR E)	TOTAL COMPLETED AND STORED TO DATE (D + E + F)	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
286	HVAC - Distribution - Material	51,000.00	0.00	0.00	0.00	0.00	0.00%	51,000.00	0.00
287	HVAC - Distribution - Labor	12,000.00	0.00	0.00	0.00		0.00%		
288	HVAC - Louvers	23,000.00	0.00	0.00	0.00	0.00	0.00%	23,000.00	0.00
289	HVAC - Vibration Isolation	40,000.00	0.00	0.00	35,000.00	35,000.00	87.50%	5,000.00	3,500.00
290	HVAC - Piping - Material	135,000.00	0.00	0.00	0.00		0.00%		
291	HVAC - Piping - Labor	179,000.00	0.00	0.00	0.00	0.00	0.00%	179,000.00	0.00
292	HVAC - Ductwork - Material	116,000.00	0.00	0.00	0.00	0.00	0.00%	116,000.00	0.00
293	HVAC - Ductwork - Labor	103,000.00	0.00	0.00	0.00		0.00%		
294	HVAC - Insulation	105,000.00	0.00	0.00	0.00	0.00	0.00%	105,000.00	0.00
295	HVAC - Test, Adjust, Balancing	13,000.00	0.00	0.00	0.00		0.00%		
296	HVAC - Startup	13,000.00	0.00	0.00	0.00	0.00	0.00%	13,000.00	0.00
297	HVAC - Controls	168,000.00	0.00	0.00	0.00		0.00%		
298	Electrical - Bonding	52,000.00	52,000.00	0.00	0.00		100.00%		5,200.00
299	Electrical - Demolition	38,000.00	22,800.00	15,200.00	0.00	38,000.00	100.00%	0.00	3,800.00
300	Electrical - SOG - Rough	375,000.00	0.00	95,000.00	0.00	95,000.00	25.33%	280,000.00	9,500.00
301	Electrical - Wall / OH - Rough	820,000.00	0.00	0.00	0.00	0.00	0.00%	820,000.00	0.00
302	Electrical - Fixtures - Material	825,000.00	0.00	0.00	0.00	0.00	0.00%	825,000.00	0.00
303	Electrical - Switch Gear - Material	225,000.00	0.00	0.00	0.00	0.00	0.00%	225,000.00	0.00
304	Electrical - Generator - Material	623,000.00	0.00	55,000.00	0.00		8.83%		5,500.00
305	Electrical - Site Lighting	165,000.00	0.00	0.00	0.00		0.00%	165,000.00	0.00
306	Electrical - Raceways	495,000.00	0.00	0.00	0.00	0.00	0.00%	495,000.00	0.00

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User Notes:

Α	В	C	D	E	F	G		H	I
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	WORK CO FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	MATERIALS PRESENTLY STORED (NOT IN D OR E)	TOTAL COMPLETED AND STORED TO DATE (D + E + F)	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
307	Electrical - Wiring	165,000.00	0.00	0.00	0.00	0.00	0.00%	165,000.00	0.00
308	Electrical - Trim	548,000.00	0.00	0.00	0.00	0.00	0.00%	548,000.00	0.00
309	Cabling	182,000.00	0.00	0.00	0.00	0.00	0.00%	182,000.00	0.00
310	Access Control / Intrusion / Variable Message Signs	475,000.00	258,182.00	0.00	0.00	258,182.00	54.35%	216,818.00	25,818.20
	Fire Alarm	71,000.00	0.00	0.00	0.00	0.00	0.00%	71,000.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
	GRAND TOTAL	\$30,898,447.83	\$3,472,236.47	\$744,950.00	\$278,000.00	\$4,495,186.47	14.55%	\$26,403,261.36	\$449,518.65



STATE OF NORTH CAROLINA COUNTY OF MECKLENBURG

PARTIAL WAIVER OF LIEN

Whereas, the undersigned has been employed by and/or contracted with Beaufort County to furnish labor and/or materials in connection with improvements on the following described project:

Hilton Head Island Airport – Terminal Improvements Phase I Hilton Head Island, South Carolina 29926 120 Beach City Road

and improvements thereon on account of labor and/or materials furnished by the undersigned on or before April 30, claims, or right of lien or claim under the statutes of the State of North Carolina, on the above described premises 2024. Unpaid retainage is excluded from this agreement. The undersigned, for and in consideration of receipt of \$670,455.00 does hereby waive and release any and all liens,

Contractor: Edison Foard, LLC

PO Box 19888

Charlotte, NC 28219-0888

Signed by:

Project Manage **Nicholas Roberts**

Signature:

THE STATE OF: North Carolina

COUNTY OF: Mecklenburg

acknowledged the due execution of the foregoing instrument. Witness my hand and official seal this 16th day of May, 2024. I, Lisa R Wilbanks, Notary Public, do hereby certify that Nicholas Roberts, personally appeared before me this day and

the of wherea

Notary Public Signature

Print: Lisa R. Wilbanks

My commission expires: June 28, 2026

Mecklenburg County LISA R. WILBANKS NOTARY PUBLIC

(Seal)

My Commission Expires June 28, 2026 North Carolina

Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

STATE AND COUNTY SALES/USE TAX STATEMENT

Contractor (or Subcontractor's) Name	Edison Foard, LLC	
·		

Job: TERMINAL IMPROVEMENTS - Phase 1 - Hilton Head Island Airport, Hilton Head Island, SC

INVOICE	INVOICE DATES	VENDOR'S NAME	TYPE OF MATERIAL	TOTAL AMOUNT OF INVOICE	SALES	JUSE TAX
	FROM <u>4-1</u> 20 <u>24</u> THRU <u>4-30</u> 20 <u>24</u>			OF INVOICE	STATE %	COUNTY %
	NOTHING TO REPORT THIS PERIOD					

SUBTOTAL THIS PAGE:

C-3

Sheet No. 1 of 2

Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

TOTAL ALL INVOICES: NOTHING TO REPORT THIS PERIOD

Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

TAX STATEMENT AND CERTIFICATION

Sworn and subscribed before me this 16th day of May 20 24 NOTARY PUBLIC Lisa R. Wilbanks
are the subcontractors that are engaged by this Contractor in the performance of this Contract whose tax
(THE FOLLOWING PORTION TO BE FILLED OUT BY THE GENERAL CONTRACTOR ONLY) It is further certified that: Nothing to Report This Period
become a part of the construction of the: TERMINAL IMPROVEMENTS-Phase 1 — Hilton Head Island Airport, Hilton Head Island, SC
20 24 to April 30, 20 24 , inclusive for the materials and equipment that were or will
Carolina and Local Sales or Use Tax paid by the undersigned Contractor from April 1
This is to certify that the foregoing or attached statement is a true and complete statement of all South

Forms C-5

Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

Cardinal Concrete Corporation

Contractor (or Subcontractor's) Name Cardinal Concrete Corporat

Job: TERMINAL IMPROVEMENTS - Phase I - Hilton Head Island Airport, Hilton Head Island, SC Sheet No. of

INVOICE	INVOICE DATES	VENDOR'S NAME	TYPE OF MATERIAL	TOTAL AMOUNT OF INVOICE	SALES	USE TAX
	FROM _ 3.48_20.24 THRU _4-4_20.24			or invoice.	STATE %	COUNTY %
500 2688 1958 TN-2400045 TN-2400049 1030264254 1030264409	3/24/2024	White Cap Blu Rebar Blu Rebar SRM Concrete SRM Concrete SR n Concrete	Concrete Accesoris Rebar Rebar Concrete Concrete Concrete	\$3,723.20 \$37,030.43 \$37,298.62 \$12,358.50 \$17,703.88 \$14,894.40	693.00	78,29 346.08 348.58 (15.50 72.84 (39.20

SUBTOTAL THIS PAGE: 13, 098 . 57

Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

TOTAL ALL INVOICES: \$113,098.53

Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1
February 15, 2023

TAX STATEMENT AND CERTIFICATION

become a part of the construction of the: Carolina and Local Sales or Use Tax paid by the undersigned Contractor from This is to certify that the foregoing or attached statement is a true and complete statement of all South 6 TERMINAL IMPROVEMENTS-Phase 1 – Hilton Head Island Airport, Hilton Head Island, SC S 20 21, inclusive for the materials and equipment that were or will TOP

(THE FOLLOWING PORTION TO BE FILLED OUT BY THE GENERAL CONTRACTOR ONLY)

It is further certified that:

statements are also enclosed herewith. are the subcontractors that are engaged by this Contractor in the performance of this Contract whose tax

CONTRACTOR OR SUBCONTRACTOR

Sworn and subscribed before me this

18 dux of April 2024 NOTARY PUBLIC HAX Rome

NOT NO THE TENT OF
(SEAL)

The Wilson Group

Hilton Head Island Airport (HXD) Terminal Improvements - Phase 1

22-Apr-24

Project No.: 9221-000

STATE AND COUNTY SALES/USE TAX STATEMENT

Contractor (or Subcontractor's Name) Master Steel, LLC

Job: TERMINAL IMPROVEMENTS - Phase 1 - Hilton Head Island Airport, Hilton Head Island, SC Sheet No. of

INVOICE	INVOICE DATES	VENDOR'S NAME	TYPE OF MATERIAL	TOTAL AMOUNT OF INVOICE	SALES/U	ISE TAX
	FROM20				STATE %	COUNTY
	THRU20					%
T00361367	01/10/2024	Steel Warehouse of Tennessee	1017 PLATE	\$3,036.17	\$168.68	\$56.23
T00363336	02/02/2024	Steel Warehouse of Tennessee	1017 PLATE	\$4,375.18	\$243.07	\$81.02
T00364783	02/20/2024	Steel Warehouse of Tennessee	1017 PLATE	\$3,761.60	\$208.98	\$69.66
2288863	12/01/2023	Infra-Metals	1017 ABM Material, HSS,WF'S AND WT's	\$301.17	\$16.73	\$5.58
2288864	12/01/2023	Infra-Metals	1017 ABM Material, HSS,WF'S AND WT's	\$4,638.56	\$257.70	\$85.90
2288865	12/01/2023	Infra-Metals	1017 ABM Material, HSS,WF'S AND WT's	\$7,053.05	\$391.84	\$130.61
2288866	12/01/2023	Infra-Metals	1017 ABM Material, HSS,WF'S AND WT's	\$31,727.19	\$1,762.62	\$587.54
2292829	12/11/2023	Infra-Metals	1017 ABM Material, HSS,WF'S AND WT's	\$8,248.05	\$458.23	\$152.74
2292830	12/11/2023	Infra-Metals	1017 ABM Material, HSS,WF'S AND WT's	\$19,942.80	\$1,107.93	\$369.31
2292831	12/11/2023	Infra-Metals	1017 ABM Material, HSS,WF'S AND WT's	\$17,258.81	\$958.82	\$319.61
0474305-IN	02/19/2024	Structural Bolt and Mfg. Inc	1017 ANCHOR BOLTS	\$16,302.20	\$905.68	\$301.89
0475937-IN	03/21/2024	Structural Bolt and Mfg. Inc	1017 REV3 ANCHOR RODS	\$1,110.00	\$61.67	\$20.56
		_			\$0.00	\$0.00
				\$117,754.78	\$6,541.93	\$2,180.64

SUBTOTAL THIS PAGE:

Forms

C-3

Hilton Head Island Airport (HXD) Terminal Improvements - Phase 1
February 15, 2023

TAX STATEMENT AND CERTIFICATION

This is to certify that the foregoing or atta	This is to certify that the foregoing or attached statement is a true and complete statement of all South
Carolina and Local Sales or Use Tax paid by the undersigned Contractor from	y the undersigned Contractor from 12/12,
20_23 to, 20	$20\overline{24}$, inclusive for the materials and equipment that were or will
become a part of the construction of the:	
TERMINAL IMPROVEMENTS-Phase	nase 1 – Hilton Head Island Airport, Hilton Head Island, SC
(THE FOLLOWING PORTION TO	(THE FOLLOWING PORTION TO BE FILLED OUT BY THE GENERAL CONTRACTOR ONLY)
It is further certified that:	
are the subcontractors that are engaged by this Contractor	by this Contractor in the performance of this Contract whose tax
statements are also enclosed herewith.	
	Digitally signed by Clayron Laird DN: C-US, E-clair@master-steet.net, O-Master Steet, ON-EClayron Laird Reason: Applicated As Noted Date: 2004. OF SUBCONTRACTOR CONTRACTOR OR SUBCONTRACTOR
Sworn and subscribed before me this	
22nd day of April 2024	
Dynaly signed by Clayron Laid DN C+US, E-clair@master steel negl O-Master Steel, CN+Clayron Laid Rasson Approved An Noted Dnc: 2026/04/23 18 if 408 4/907	
	PUBLIC
(SEAL)	1200

Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

STATE AND COUNTY SALES/USE TAX STATEMENT

Contractor (or Subcontractor's) Name Quality Electrical Systems	
Job: TERMINAL IMPROVEMENTS - Phase 1 - Hilton Head Island Airport, Hilton Head Island, SC	Sheet No of

INVOICE	INVOICE DATES	VENDOR'S NAME	TYPE OF MATERIAL	TOTAL AMOUNT OF INVOICE	SALES/USE TAX				
	FROM 2-21 20 21 THRU 4-22 20 21			OF INVOICE	STATE %	COUNTY %			
		SEE ATTACHED		ii					
				4)					
						7			
				TOTAL THIS PAGE:					

SUBTOTAL THIS PAGE:

Hilton Head Island Airport (HXD) Terminal Improvements – Phase 1 February 15, 2023

TOTAL ALL INVOICES: #21,507,38

TAX STATEMENT AND CERTIFICATION

This is to cert	ify that the foregoing or attached statement is a true and con	plete statement of all South
Carolina and Lo	ocal Sales or Use Tax paid by the undersigned Contractor fro	om 2-21-24
20_ 15-1 to		
	f the construction of the:	, mile admits in the More of Mile
_		
TERMI	NAL IMPROVEMENTS-Phase 1 – Hilton Head Island Airr	port, Hilton Head Island, SC
(THE F	OLLOWING PORTION TO BE FILLED OUT BY THE GEN	ERAL CONTRACTOR ONLY)
It is further ce	errified that	
it is inition co	Turiod that.	
are the subcon	tractors that are engaged by this Contractor in the perfo	ormance of this Contract whose to
statements are a	ulso enclosed herewith.	
	Quali	L Electrical Systems
Swam and subs	cribed before me this	
29 day of	227740	
NOTARY PUBLI	C	
(SEAL)		

Forms

C-5

Wage and Hour Division

PAYROLL



For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR OR SUBCONTRACTOR Edison Foard, LLC							ADDRESS PO Box 19888 Charlotte, NC 28219								OMB No. 1235-0008 Expires 09/30/2026	
PAYROLL NO. 24	Luison	FOR WEEK ENDIN		04/06/2024				CT AND LOCAT	TON Improvements Road, Hilton H	s - Phase ead Islan	26	PROJECT OR CONTRACT NO. IFB #041923				
(1) (2) 9 NG		(3)	RST.	(4) DA	(4) DAY AND DATE		(5)	(6)	(7)			DEC	(8) DUCTIONS	22.482	(9) NET	
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	OT. OR ST	HOURS WO	DRKED E	ACH DAY	TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX			OTHER	TOTAL DEDUCTIONS	WAGES
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

Date	5/2/2024			(b) WHERE FRINGE BENEFITS ARE PAIL	O IN CASH						
ı	Mark Kolb	Vice President		Each laborer or mechanic listed in the above referenced payroll has been payroll.							
11	(Name of Signatory Party)	(Title)		 Each laborer or mechanic listed in the above referenced payroll has been p as indicated on the payroll, an amount not less than the sum of the applicat basic hourly wage rate plus the amount of the required fringe benefits as lis in the contract, except as noted in section 4(c) below. 							
do hereb	y state:										
(1)	That I pay or supervise the payment of the pers	ons employed by		, ,	s noted in Section 4(c) below.						
. ,	Edison Foard,	LLC	on the	(c) EXCEPTIONS							
	(Contractor or Subcont	ractor)	on the	EXCEPTION (CRAFT)	EXPLANATION						
HHI	A Terminal Improvements - Phase 1	; that during the payroll period con	nmencing on the	· · · · · · · · · · · · · · · · · · ·							
	(Building or Work)										
31st	_ day ofMarch, 2024_, and endir	ng the 6th day of April			¥						
	ns employed on said project have been paid the vill be made either directly or indirectly to or on b		rebates have								
	Edison Foard, Li	_C	from the full								
	(Contractor or Subcor	tractor)	nom the full								
weekly w	ages earned by any person and that no deduct	ions have been made either directly	or indirectly								
3 (29 C.F	full wages earned by any person, other than per F.R. Subtitle A), issued by the Secretary of Labo 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 314	r under the Copeland Act, as amen	Regulations, Part ded (48 Stat. 948,								
			2								
				REMARKS:							
				RENDARIO.							
correct ar applicable	That any payrolls otherwise under this contract nd complete; that the wage rates for laborers or e wage rates contained in any wage determinati therein for each laborer or mechanic conform wi	mechanics contained therein are ron incorporated into the contract; the	not less than the								
program Training,	That any apprentices employed in the above peri registered with a State apprenticeship agency in United States Department of Labor, or if no suc Bureau of Apprenticeship and Training, United S	ecognized by the Bureau of Apprenth h recognized agency exists in a Sta	ticeship and								
(4) T				NAME AND TITLE	SIGNATURE						
	(a) WHERE FRINGE BENEFITS ARE PAID TO) APPROVED PLANS, FUNDS, OF	RPROGRAMS	Mark Kolb, Vice President	SIGNIFICE TO STATE OF THE STATE						
	in addition to the basic hourly war	ge rates paid to each laborer or m	echanic listed in		WAR TO THE REAL PROPERTY OF THE PROPERTY OF TH						
	the above referenced payroll, pa	yments of fringe benefits as listed opriate programs for the benefit of s	in the contract	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION TITLE 31 OF THE UNITED STATES CODE.	STATEMENT, MAY SO JECT THE CONTRACTOR OR DN. SEE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF						

Wage and Hour Division

PAYROLL



For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR OR SUBCONTRACTOR Edison Foard, LLC									ADDRESS PO Box 19888 Charlotte, NC 28219									
PAYROLL NO. FOR WEEK ENDING 04/13/2024							PROJECT AND LOCATION HHIA - Terminal Improvements - Phase 1 120 Beach City Road, Hilton Head Island, SC 29926 IFB #041923									ACT NO.		
(1)	(2) SNOIL	(3)	OR ST.				(5) (6)	(6)	(7)					(9) NET				
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	10	HOURS W	ORKED	EACH D	DAY	TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX			OTHER	TOTAL DEDUCTIONS	WAGES PAID FOR WEE	
NOTHING TO REPORT			0															
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed, DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

Date	5/2/2024		(b) WHERE FRINGE BENEFITS ARE PAID	IN CASH							
1	Mark Kolb	Vice President	_								
',	(Name of Signatory Party)	(Title)	Each laborer or mechanic l as indicated on the payroll,	 Each laborer or mechanic listed in the above referenced payroll has been pa as indicated on the payroll, an amount not less than the sum of the applicable 							
do hereb	y state:		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.								
(1)	That I pay or supervise the payment of the pers	ons employed by		oted in Section *(c) below.							
	Edison Foard,	LLC on the	(c) EXCEPTIONS								
	(Contractor or Subcont	ractor)	EXCEPTION (CRAFT)	EXPLANATION							
HHI		; that during the payroll period commencing on the									
7th	(Building or Work) day of April 2024 and endi	ng the 13th day of April 2024									
		full weekly wages earned, that no rebates have	2								
	Edison Foard, L	_C from the f	all								
	(Contractor or Subcor										
from the	full wages earned by any person, other than pe	ions have been made either directly or indirectly missible deductions as defined in Regulations, Par r under the Copeland Act, as amended (48 Stat. 9									
	108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 314			7							
			REMARKS:								
correct ar	nd complete; that the wage rates for laborers of	required to be submitted for the above period are mechanics contained therein are not less than the on incorporated into the contract; that the classification the work he performed.	ions								
program Training,	registered with a State apprenticeship agency r	od are duly registered in a bona fide apprenticeship ecognized by the Bureau of Apprenticeship and th recognized agency exists in a State, are register tates Department of Labor.									
(4) T	hat: (a) WHERE FRINGE BENEFITS ARE PAID TO	O APPROVED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE Mark Kolb, Vice President	SIGNATURE							
	_ in addition to the basic hourly wa	ge rates paid to each laborer or mechanic listed in									
	the above referenced payroll, pa have been or will be made to appr except as noted in section 4(c) be	yments of fringe benefits as listed in the contrac opriate programs for the benefit of such employees ow.	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE ST SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. TITLE 31 OF THE UNITED STATES CODE.								
	,										

Wage and Hour Division

PAYROLL

WAGE AND HOUR DIVISION Revised December 2008

For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR OR SUBCONTRACTOR Edison Foard, LLC								ADDRESS PO Box 19888 Charlotte, NC 28219								
PAYROLL NO. FOR WEEK ENDING 04/20/2024							CT AND LOCAT \ - Terminal Beach City F	OR CONTRAC	ACT NO.							
(1)	(2) SNO	(3)	ST.			(5)	(5) (6)	(7)	**				(9) NET			
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	OT. OR	HOURS WORK	ED EACH DAY	TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX			OTHER	TOTAL DEDUCTIONS	WAGES	
NOTHING TO REPORT			0													
			s													
			s													
			0													
			s													
			0													
			0						1							
45-	100		s													
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			s					ion controls to m								

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contracts to respond to the information collection contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Pegattment of Labor (Pole and English and Pole and English an

Public Burden Statement

Date	5/2/2024			(b) WHERE FRINGE	BENEFITS ARE PAID IN	N CASH						
	Mark Kolb	Vice President		_	Each laborer or mechanic listed in the above referenced payroll has been pair							
',	(Name of Signatory Party)	(Title)		∐ − Ea	ch laborer or mechanic list indicated on the payroll.	sted in the above referenced payroll has been paid, an amount not less than the sum of the applicable						
do hereby				basic hourly wage rate plus the amount of the required fringe benefits as list in the contract, except as noted in section 4(c) below.								
(1) 7	That I pay or supervise the payment of the pers	sons employed by			are contract, encope as the	(c) 50.00.						
, ,	Edison Foard,	LLC	an tha	(c) EXCEPTIONS								
	(Contractor or Subcon	tractor)	on the	EXCEPTION	N (CRAFT)	EXPLANATION						
HHI	A Terminal Improvements - Phase 1	_; that during the payroll period comme	encing on the		-	-						
14th	(Building or Work) day of April 2024 and end	ing the 20th day of April	2024									
all person been or w	ns employed on said project have been paid the vill be made either directly or indirectly to or on	e full weekly wages earned, that no rel	bates have									
	Edison Foard, L	LC	from the full	:								
	(Contractor or Subco	ntractor)				-						
from the f 3 (29 C.F	ages earned by any person and that no deduc full wages earned by any person, other than pe .R. Subtitle A), issued by the Secretary of Lab 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 31	ermissible deductions as defined in Reg or under the Copeland Act, as amended	ulations, Part									
	* Selventine of											
	7 2 2 1002											
				REMARKS:	2							
correct ar applicable set forth t (3) Ti program in Training,	that any payrolls otherwise under this contract and complete; that the wage rates for laborers of a wage rates contained in any wage determinal therein for each laborer or mechanic conform what any apprentices employed in the above per registered with a State apprenticeship agency. United States Department of Labor, or if no su	or mechanics contained therein are not tion incorporated into the contract; that the with the work he performed. Friod are duly registered in a bona fide appreciate recognized by the Bureau of Apprentice ich recognized agency exists in a State,	less than the the classifications perenticeship and									
with the B	Bureau of Apprenticeship and Training, United in the state of the stat	States Department of Labor.			30 1 to - 4.							
(7)	(a) WHERE FRINGE BENEFITS ARE PAID T	O APPROVED PLANS, FUNDS, OR PR	ROGRAMS	NAME AND TITLE Mark Kolb, Vice Presider	nt	SIGNATURE						
	- in addition to the basic hourly wa	age rates paid to each laborer or mech	nanic listed in	THE WILLFUL FALSIFICATION	N OF ANY OF THE AROVE ST	ATEMENTS MAY SUBJECT THE CONTRACTOR OR						
	have been or will be made to app except as noted in section 4(c) be	ropriate programs for the benefit of sucl	h employees,		R CRIMINAL PROSECUTION.	SEE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF						

Wage and Hour Division

PAYROLL

WAGE AND HOUR DIVISION Revised December 2008

For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

Edison Foard, LLC								ADDRESS PO Box 19888 Charlotte, NC 28219								OMB No. 1235-0008 Expires 09/30/2026	
PAYROLL NO. FOR WEEK ENDING 04/27/2024						HHIA - Terminal Improvements - Phase 1 120 Beach City Road, Hilton Head Island, SC 29926 IFB #04192								CONTRACT NO.			
(1)	(2) SNO	(3)			(5)	(5) (6)	(7)				(8) DUCTIONS			(9) NET			
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	0T. O	HOURS	VORKED	EACH [DAY	TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX			OTHER	TOTAL DEDUCTIONS	WAGES PAID
NOTHING TO REPORT			o s														
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

Date	5/2/2024		(b) WHE	RE FRINGE BENEFITS ARE PAID IN	I CASH
1	Mark Kolb	Vice President	(0) *****	_	
',	(Name of Signatory Party)	(Title)		 Each laborer or mechanic lise as indicated on the payroll, a 	sted in the above referenced payroll has been paid, an amount not less than the sum of the applicable
do hereb	y state:				the amount of the required fringe benefits as listed
(1)	That I pay or supervise the payment of the per	sons employed by	= =	,	ted in Section 4(c) below.
	Edison Foard	LLC	(c) EXCE	PHONS	
	(Contractor or Subcon	tractor)	on the	EXCEPTION (CRAFT)	EXPLANATION
HH	A Terminal Improvements - Phase 1	_; that during the payroll period commencing		, ,	
	(Building or Work)				
		ing the,,	2024		
	ns employed on said project have been paid the vill be made either directly or indirectly to or on		have		
	Edison Foard, L	LC	n the full		
	(Contractor or Subco				
	rages earned by any person and that no deduc				
3 (29 C.F	full wages earned by any person, other than pe R. Subtitle A), issued by the Secretary of Lab 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 31	or under the Copeland Act, as amended (48 S			
-					
			_		
			REMARKS:		
correct a applicabl	That any payrolls otherwise under this contract nd complete; that the wage rates for laborers or e wage rates contained in any wage determina therein for each laborer or mechanic conform or	or mechanics contained therein are not less that the classification incorporated into the contract; that the classification in the contract is the classification in the contract is the classification in the contract in the classification in the contract is the classification in the contract in the classification in the contract is the classification in the contract in the contract is the classification in the contract in the contract is the classification in the contract in	han the		
program Training,	hat any apprentices employed in the above pe registered with a State apprenticeship agency United States Department of Labor, or if no su Bureau of Apprenticeship and Training, United	recognized by the Bureau of Apprenticeship ar ch recognized agency exists in a State, are re	nd		
(4) T	hat:	O ADDDOVED DI ANO EUNDO CE SECON	NAME AND TITLE		SIGNATURE
	(a) WHERE FRINGE BENEFITS ARE PAID T	U APPROVED PLANS, FUNDS, OR PROGR	Mark Kolb, Vid		
	in addition to the basic hourly was	age rates paid to each laborer or mechanic lis	isted in		THE
	the above referenced payroll, pa	ayments of fringe benefits as listed in the corropriate programs for the benefit of such employers.	ontract THE WILLFUL F SUBCONTRACTO	ALSIFICATION OF ANY OF THE ABOVE STA IR TO CIVIL OR CRIMINAL PROSECUTION. S UNITED STATES CODE.	TEMENTS MAY SUBJECT THE CONTRACTOR OR SEE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF

Wage and Hour Division

PAYROLL



For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

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NAME OF CONTRACTOR OR SUBCONTE	ACTOR E	7 6/30//3 8/6 //01/	oquiro	2000	0110 10 111	00,100					_	3 00/10/1/0	moor.			Nevised De	cember 2004
	_] ETE CORPORATIO	ON					ADDRE	SS 3820 GAF MIDLAND	NC 28107	ROAD					OMB No. 1 Expires 09	235-0008 30/2026
PAYROLL NO 2		FOR WEEK ENDING		1/2024				PROJE HILT IMPE	CT AND LOCATI ON HEAD IS ROVEMENTS	ON LAND AIRPO PHASE 1	ORT TERM	IINAL		PROJECT - 232932-	OR CONTRAC	TNO	
(1)	COING (S)	(3)	N V) DAY AND		s s	(5)	(6)	(7)			DED	(81 UCTIONS			(9) NET
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	5 2		27 28 WORKED			TOTAL	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX	INSURANC E	401K	OTHER	TOTAL DEDUCTIONS	WAGES PAID
RHANE FERGUSON 9200	0	OPERATOR	0	() 4 Hz				8.00	Salaer	\$1,923.08	\$130.57	\$302.04	\$216.33	\$76.92		\$725.86	\$1,197.2
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F. R. §§ 3.3.55(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F. R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date4-2-2024	(b) WHERE FRINGE BENEFITS ARE PAID IN CASH
BRIDGETTE ROWELL PAYROLL	
(Name of Signatory Party) (Title)	 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
do hereby state:	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.
(1) That I pay or supervise the payment of the persons employed by	(c) EXCEPTIONS
CARDINAL CONCRETE CORPORATION on the	
(Contractor or Subcontractor)	EXCEPTION (CRAFT) EXPLANATION
HILTON HEAD ISLAND AIRPORT ; that during the payroll period commencing on the	le le
(Building or Work) 25 day of MARCH 2024 and ending the 31 day of MARCH 2024	
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	
CARDINAL CONCRETE CORPORATION from the	full
(Contractor or Subcontractor)	
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 Regulations, Pa 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:	art 348,
	REMARKS:
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classificated for the therein for each laborer or mechanic conform with the work he 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 recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are register with the Bureau of Apprenticeship and Training, United States Department of Labor.	
(4) That:	A
(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE BRIDGETTE ROWELL PAYROLL SIGNATURE
in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the basic hourly wage rates paid to each laborer or mechanic listed in the basic hourly wage rates paid to each laborer or mechanic listed in the basic hourly wage rates paid to each laborer or mechanic listed in the basic hourly wage rates paid to each laborer or mechanic listed in the basic hourly wage rates paid to each laborer or mechanic listed in the basic hourly wage rates paid to each laborer or mechanic listed in the basic hourly wage rates paid to each laborer or mechanic listed in the basic hourly wage rates paid to each laborer or mechanic listed in the basic hourly wage rates paid to each laborer or mechanic listed in the basic hourly wage rates paid to each laborer or mechanic listed in the basic hourly wage rates paid to each laborer or mechanic listed in the basic hourly wage rates paid to each laborer or mechanic listed in the basic hourly wage rates have a laborer or mechanic listed in the basic hourly wage rates have a laborer or mechanic listed in the laborer or mechanic listed in the basic hourly wage rates have a laborer or mechanic listed in the laborer or mechanic	in (District Knowell
the above referenced payroll, payments of fringe benefits as listed in the contract	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR
have been or will be made to appropriate programs for the benefit of such employees except as noted in section 4(c) below.	SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 10 1 OF TITLE 18 AND SECTION 3729 OF TITLE 31 OF THE UNITED STATES CODE

Wage and Hour Division

PAYROLL

WAGE AND HOUR DIVISION Revised December 2008

For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

OR SUBCONTRACTOR NAME OF CONTRACTOR ADDRESS 3820 GARMON MILL ROAD OMB No 1235-0008 MIDLAND NC 28107 Expires 09/30/2026 CARDINAL CONCRETE CORPORATION PROJECT OR CONTRACT NO PROJECT AND LOCATION
HILTON HEAD ISLAND AIRPORT TERMINAL FOR WEEK ENDING PAYROLL NO. 3 04/07/2024 **IMPROVEMENTS PHASE 1** 232932-CON08 (4) DAY AND DATE (1) (2) (3) (6) (9) DEDUCTIONS F S S w TH NET NAME AND INDIVIDUAL IDENTIFYING NUMBER GROSS WITH-INSURANU 401K WAGES 2 3 4 5 6 (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY WORK TOTAL RATE AMOUNT HOLDING TOTAL PAID NUMBER) OF WORKER CLASSIFICATION HOURS WORKED EACH DAY HOURS OF PAY EARNED FICA TAX OTHER DEDUCTIONS FOR WEEK **RHANE FERGUSON 9200 OPERATOR** \$130.57 \$302.04 S216.33 \$76.92 \$725.86 \$1,197,22 0 Salary 4 (0) 4 631 4 00 \$1,923.08 l٥

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §\$ 3.3, 5.5(a). The Cupeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5 5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits

Public Burden Statement

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Date	4-9-2024			(b) WHERE FRINGE BENEFITS ARE P.	AID IN CASH
1	BRIDGETTE ROWELL	PAYROLL		_	
'	(Name of Signatory Party)	(Title)			anic listed in the above referenced payroll has been paid, yroll, an amount not less than the sum of the applicable
do hereby	y state:			basic hourly wage rate	plus the amount of the required fringe benefits as listed as noted in section 4(c) below.
(1)	That I pay or supervise the payment of the per	sons employed by			as noted in section 4(c) below.
	CARDINAL CONCRETE	CORPORATION	on the	(c) EXCEPTIONS	
	(Contractor or Subcor	tractor)	On the	EXCEPTION (CRAFT)	EXPLANATION
H	HILTON HEAD ISLAND AIRPORT	; that during the payroll period comme	encing on the		
1	(Building or Work) day of APRIL 2024, and end	ing the 7 day of APRIL	2024		
	ns employed on said project have been paid the vill be made either directly or Indirectly to or on		bates have		
	CARDINAL CONCRETE C	ORPORATION	from the full	7	
	(Contractor or Subco	entractor)			
3 (29 C.F.	full wages earned by any person, other than poor. R. Subtitle A), issued by the Secretary of Lab 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 31	or under the Copeland Act, as amende			
				REMARKS:	
correct ar applicable set forth t (3) Ti program r Training,	that any payrolls otherwise under this contract and complete; that the wage rates for laborers of a wage rates contained in any wage determinated in the each laborer or mechanic conforms that any apprentices employed in the above peregistered with a State apprenticeship agency United States Department of Labor, or if no subtreau of Apprenticeship and Training, United	or mechanics contained therein are not tion incorporated into the contract; that with the work he performed. Indo are duly registered in a bona fide all recognized by the Bureau of Apprentica ch recognized agency exists in a State,	less than the the classifications operaticeship ship and		
(4) TI	(a) WHERE FRINGE BENEFITS ARE PAID T — in addition to the basic hourly we the above referenced payroll, p.	age rates paid to each laborer or mech syments of fringe benefits as listed in ropriate programs for the benefit of sucl	anic listed in	NAME AND TITLE BRIDGETTE ROWELL PAYROLL THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTITLE 31 OF THE UNITED STATES CODE.	SIGNATURE SIGNATURE LI LI LI LI LI LI LI LI LI L

Wage and Hour Division

PAYROLL

WAGE AND HOUR DIVISION
Revised December 2008

For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. ADDRESS 3820 GARMON MILL ROAD OR SUBCONTRACTOR NAME OF CONTRACTOR OMB No. 1235-0008 MIDLAND NC 28107 Expires 09/30/2026 CARDINAL CONCRETE CORPORATION PROJECT OR CONTRACT NO. PROJECT AND LOCATION
HILTON HEAD ISLAND AIRPORT TERMINAL FOR WEEK ENDING PAYROLL NO 04/14/2024 4 232932-CON08 **IMPROVEMENTS PHASE 1** (4) DAY AND DATE (5) (6) (1) (2) (3) (9) NO OF WITHHOLDING EXEMPTIONS DEDUCTIONS W TH F S S M NET NAME AND INDIVIDUAL IDENTIFYING NUMBER **GROSS** WITH WAGES INSURANG 401K Q 10 12 13 5 TOTAL (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY WORK RATE **AMOUNT** HOLDING TOTAL PAID CLASSIFICATION NUMBER) OF WORKER HOURS WORKED EACH DAY HOURS OF PAY EARNED FICA TAX OTHER DEDUCTIONS FOR WEEK **RHANE FERGUSON 9200 OPERATOR** \$130.57 \$302.04 S216.33 \$76,92 \$725.86 \$1,197,22 0 20.00 4 00 4.00 4 181 SalaAu **≤**1.923.08 \$270.00 **JERRY COVINGTON 7412** TRUCK DRIVER 3 \$20.66 \$1.00 \$44.86 \$66.52 \$203.48 () 00 10.00 27.00 0.00 0 (31) (a 100) 0

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and that each that each project paylong age rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally require wages and fringe benefits.

Public Burden Statement

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Date4-16-2024		(b) WHERE FRINGE BENEFITS ARE PAID IN C	CASH
, BRIDGETTE ROWELL	PAYROLL	_	
(Name of Signatory Party)	(Title)		d in the above referenced payroll has been paid, amount not less than the sum of the applicable
do hereby state:			amount of the required fringe benefits as listed
(1) That I pay or supervise the payment of the persons emplo		(c) EXCEPTIONS	(4)
(Contractor or Subcontractor)	on the	EXCEPTION (CRAFT)	EXPLANATION
HILTON HEAD ISLAND AIRPORT ; that du (Building or Work) 8 day of APRIL 2024, and ending the	ring the payroll period commencing on the 14 day of APRIL 2024,		
all persons employed on said project have been paid the full week been or will be made either directly or indirectly to or on behalf of			
CARDINAL CONCRETE CORPORA	ATION from the full		
(Contractor or Subcontractor)			
weekly wages earned by any person and that no deductions have from the full wages earned by any person, other than permissible 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described the secretary of Labor under the se	deductions as defined in Regulations, Part ne Copeland Act, as amended (48 Stat. 948,		
		REMARKS:	
(2) That any payrolls otherwise under this contract required to correct and complete; that the wage rates for laborers or mechan applicable wage rates contained in any wage determination incorp set forth therein for each laborer or mechanic conform with the wo (3) That any apprentices employed in the above period are duprogram registered with a State apprenticeship agency recognized Training, United States Department of Labor, or if no such recogniwith the Bureau of Apprenticeship and Training, United States Department.	ics contained therein are not less than the orated into the contract; that the classifications rk he performed. If y registered in a bona fide apprenticeship of by the Bureau of Apprenticeship and lized agency exists in a State, are registered		
(4) That: (a) WHERE FRINGE BENEFITS ARE PAID TO APPRO	VED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE BRIDGETTE ROWELL PAYROLL	SIGNATURE ()
in addition to the basic hourly wage rates a the above referenced payroll, payments of have been or will be made to appropriate process.	f fringe benefits as listed in the contract	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATE SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE	
except as noted in section 4(c) below.	-G	TITLE 31 OF THE UNITED STATES CODE	

Wage and Hour Division

PAYROLL

WAGE AND HOUR DIVISION Revised December 2008

For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR OR SUBCONTR		☑ RETE CORPORATIO	NC								ADDF	RESS	s 3820 GA MIDLANI	RMON MILL F D NC 28107	ROAD					OMB No. 1 Expires 09/	235-0008 30/2026
PAYROLL NO. 5		FOR WEEK ENDING		1/21/	2024	,								TION SLAND AIRPO S PHASE 1	RT TERM	IINAL		PROJECT (OR CONTRAC	ON TO	
(1)	Ding ONS	(3)	R ST.	М	Т		Y ANI			SS	(5)		(6)	(7)			DED	(8) UCTIONS			(9) NET
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	OT OR ST	15	16 HOUR		18 PRKE) 2(CH D		TOTA		RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX	INSURANC E	491K	OTHER	TOTAL DEDUCTIONS	WAGES PAID
RHANE FERGUSON 9200	0	OPERATOR	o s	4 00	4 00	4 (91)	4 110	110	10		20.0	10		\$1,923.08	\$130,57	\$302.04	\$216.33	\$76.92		\$725.86	\$1,197.22
JERRY COVINGTON 7412	3	TRUCK DRIVER	0											\$270.03	\$20.66	\$1,00	\$44.86			\$66.52	\$203.51
			s 0 s	a ili	4140	11 601	114111	100			10.0		27.00		2						
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3. 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Lubor (UOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required ways and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of infurmation. It you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator. Wage and Hour Division, U.S. Department of Labor. Room \$3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date4-22-2024			(b) WHERE FRINGE BENEFITS ARE	BAID IN CASH	
BRIDGETTE ROWELL	PAYROLL				
(Name of Signatory Party)	(Title)			chanic listed in the above referenced payrol payroll, an amount not less than the sum of	
do hereby state:			basic hourly wage ra	ate plus the amount of the required fringe beat as noted in section 4(c) below.	enefits as listed
(1) That I pay or supervise the payment of the pe	sons employed by			opt as noted in section 4(c) below.	
CARDINAL CONCRETE	, , ,	on the	(c) EXCEPTIONS		
(Contractor or Subco	ntractor)	on the	EXCEPTION (CRAFT)	EXPLANATION	
HILTON HEAD ISLAND AIRPORT	; that during the payroll period commend	cing on the			
(Building or Work) 15 day of APRIL 2024 and end	ling the 21 day of APRIL	2024			
all persons employed on said project have been paid to been or will be made either directly or indirectly to or or		tes have			
CARDINAL CONCRETE O	ORPORATION	from the full			
(Contractor or Subc	ontractor)				
weekly wages earned by any person and that no dedu from the full wages earned by any person, other than p 3 (29 C.F.R. Subtitle A), issued by the Secretary of Lat 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3	ermissible deductions as defined in Regula or under the Copeland Act. as amended (4	ations, Part			
			REMARKS:		
(2) That any payrolls otherwise under this contract correct and complete; that the wage rates for laborers applicable wage rates contained in any wage determined set forth therein for each laborer or mechanic conformation.	or mechanics contained therein are not les tion incorporated into the contract; that the	ss than the			
(3) That any apprentices employed in the above perogram registered with a State apprenticeship agency Training, United States Department of Labor, or if no swith the Bureau of Apprenticeship and Training, United	recognized by the Bureau of Apprenticeshi ich recognized agency exists in a State, and	ip and .			
(4) That: (a) WHERE FRINGE BENEFITS ARE PAID	O APPROVED PLANS, FUNDS, OR PRO	GRAMS	NAME AND TITLE BRIDGETTE ROWELL PAYROLL	SIGNATURE	
	age rates paid to each laborer or mechan			Bricktle Ro	well
	ayments of fringe benefits as listed in the propriate programs for the benefit of such elelow.		THE WILLFUL FALSIFICATION OF ANY OF THE AS SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSEC TITLE 31 OF THE UNITED STATES CODE.	BOVE STATEMENTS MAY SUBJECT THE CUNTERS CUTION SEE SECTION 1001 OF TITLE 18 AND SEC	TOR OR :TION 3729 OF

Wage and Hour Division

PAYROLL

WAGE AND HOUR DIVISION Revised December 2008

For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number

NAME OF CONTRACTOR OR SUBCONT		_						ADDRE	SS 3820 GAR	RMON MILL I NC 28107	ROAD	111				ОМВ	No. 12	235-0008
PAYROLL NO 6	CONC	FOR WEEK ENDING	3	/28/2024				PROJE HILT(CT AND LOCATION HEAD ISI	ON LAND AIRPO	ORT TERM	MINAL		PROJECT 232932-	OR CONTRAC		s 09/3	30/2026
(1)	(2) ONS ONS	(3)	R ST.		W T		 S	(5)	(6)	(7)			DED	(8) UCTIONS				(9) NET
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	OT OR	22 23 HOUR	24 2 S WORK		28	TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX	INSURANC E	491K	OTHER	TOTA	IL IONS	WAGES PAID FOR WEEK
RHANE FERGUSON 9200	0	OPERATOR	o s	व्यक्त बाग	4100 41	OU		16.00	Salary	\$1,923.08	\$130.57	\$302.04	S216.33	\$76.92		\$725.	86	\$1,197.23
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C F R §§ 3.3.5.5(a). The Cultiliand Act (40 U S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U S Department of Labor (DCL) regulations at 29 C F R § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wague and fringe benefits

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date	4-30-2024			(b) WHERE EDINGE BENE	ECITO ADE DAID IN /	SACII	
	BRIDGETTE ROWELL	PAYROLL		(b) WHERE FRINGE BENE	ITTS ARE PAID IN	CASH	
Ι,	(Name of Signatory Party)	(Title)		- Each labo	orer or mechanic liste	d in the above referenced payroll	as been paid,
do herel		(1140)		as indica basic hou	ted on the payroll, an urly wage rate plus the	amount not less than the sum of the amount of the required fringe ber	refits as listed
				in the cor	ntract, except as note	d in section 4(c) below.	
(1)	That I pay or supervise the payment of the pers			(c) EXCEPTIONS			
	CARDINAL CONCRETE		on the				
	(Contractor or Subcon			EXCEPTION (CRA	(FT)	EXPLANATION	
	HILTON HEAD ISLAND AIRPORT	_; that during the payroll period comm	encing on the				
22	(Building or Work)	ing the 28 day of APRIL	2024				
all perso	_ day ofAPRIL2024_, and end ons employed on said project have been paid the will be made either directly or indirectly to or on	e full weekly wages eamed, that no re	· · · · · · · · · · · · · · · · · · ·				
	CARDINAL CONCRETE C						
	(Contractor or Subco	entractor)	_ from the full				
weekly v	vages earned by any person and that no deduc	ctions have been made either directly o	indirectly				
from the	full wages earned by any person, other than pe F.R. Subtitle A), issued by the Secretary of Labo	ermissible deductions as defined in Rec	ulations. Part				
63 Stat.	108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 31-	45), and described below:	u (40 Stat. 940,				
-			ST				
				REMARKS:			
correct a	That any payrolls otherwise under this contract and complete; that the wage rates for laborers of the wage rates contained in any wage determinated.	or mechanics contained therein are not	less than the				
set forth	therein for each laborer or mechanic conform w	with the work he performed.					
program Training,	That any apprentices employed in the above per registered with a State apprenticeship agency i United States Department of Labor, or if no su Bureau of Apprenticeship and Training, United S	recognized by the Bureau of Apprentice ch recognized agency exists in a State,	ship and				
(4) 1	That:			111			
. ,	(a) WHERE FRINGE BENEFITS ARE PAID T	O APPROVED PLANS, FUNDS, OR P	ROGRAMS	NAME AND TITLE BRIDGETTE ROWELL PAYRO	S) I I	IGNATURE	
	in addition to the basis bourly we	age rates paid to each laborer or mech	ania listad in			Bridotta Da	10
	the above referenced payroll, pa	syments of fringe benefits as listed in	the contract	THE WILLFUL FALSIFICATION OF AN	Y OF THE ABOVE STATE	MENTS MAY SUBJECT THE CON RACTO	ACC DR OR
	have been or will be made to app except as noted in section 4(c) be	ropriate programs for the benefit of suc	h employees,	SUBCONTRACTOR TO CIVIL OR CRIMI TITLE 31 OF THE UNITED STATES COS	INAL PROSECUTION SEE	SECTION 1801 OF TITLE 18 AND SECT	ON 3729 OF

U.S. Department of Labor Wage and Hour Division

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CASTILLOS	SULLOS	CASTILLOS LABOR LLC										C Delivery	GREAT F	GREAT FALLS, SC 29055	055							OMB No 1235-0008 Expires 09/30/2026	15-0008
PAYROLL NO		FOR WEEK ENDING		03/24/2024	02							MPR OF	HILTON HEAD ISLAND AIR	MORSTANGUSATION HILTON HEAD ISLAND AIRPORT TERMINAL IMPROVEMENTS PHASE 1	RT TER	MINAL			232932-CON08	CONC	CONTRACT NO NOB	ð	
(3)	LDING (S)	9	100	≾	⊣	M TH F	크일	7 8	S		S	[5]	(6)	(7)				DEDI	(8) (8)				5
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			9.00	9	ŕ	6		É			_	47.5u	daily	1,250			_						1,250
GIOVANNI RESCINOS 5734		FINISHER	9							-			250.00										
			183	T	1	-	6	÷		_		47.50	daily	1,250			_						1,250
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i e e e e e e e e e e e e e e e e e e e	ì	(a) That: (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS — in addition to the basic hourly wage rates paid to each laborar or mechanic itsaid the above referenced payout, payments of fingle benefits as listed in the containable of the page of the part of the part of the page	(3) That any apprentices employed in the above period are duly registered in a bone fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.	(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or 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 he performed.		weatily wages earned by any person and that no deductions have been made either directly or indirectly from the full wages carned by any person, other than permissible deductions as defined in Regulations, Parl 3 (29 C F R Swinde A) resured by the Secretary of Labor under the Coppland Act as amended (48 Stat. 948, 53 Stat. 108, 72 Stat. 987, 76 Stat. 337, 40 U.S.C § 3145) and described below.	CASTILLOS LABOR ILC (Contractor or Subcontractor)	all persons employed on said project have been paid the full weekly wages earned, that no rebales have been or will be made either directly or indirectly to or on behalf of said.	(Building or Work) 18 day of MARCH 2024 and ending the	HILTON HEAD ISLAND AIRPORT : Date	(1) That I pay or supervise the payment of the persons employed by CASTILLOS LABOR LLC	(Name of Signatory Party) do hereby state:	CHRISTINA CASTILLO	Oaks Carried
	FRINCE BENEFITS ARE PAID IN CASH - Each laborer or mechanic fistad in the a as indicated on the payroll, an amount in the contract, except as noted in sections in the contract, except as noted in sections. CEPTION (CRAFT) CEPTION (CRAFT) CEPTION (CRAFT) CEPTION (CRAFT) SECURIOR (CRAFT) SECURI	125	July registered in 8 bona fide apprenticeship and by the Bureau of Apprenticeship and introduced agency exists in a Suite, are registered epartment of Labor	to be submitted for the above period are mice contained therein are not less than the poreled into the contract; that the classifications with the performed.	REMARKS	we been made either dinadly or indinacity e deducations as defined in Regulations, Parl the Copeland Act as immended (48 Stat 948, described below		eby wages earned, that no rebales have if said	24 day of MARCH 2024		on the			(b) WHERE

Wage and Hour Division

PAYROLL



For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR OR SUBCONTE		S LABOR LLC								ADI	DRE:	GREAT F	R STREET ALLS, SC 29	055					OMB No. 12 Expires 09/	235-0008 30/2026
PAYROLL NO 2		FOR WEEK ENDIN		3/31/	2024					PR Hi	ILT(OVEMENTS	AND AIRPO PHASE 1	ORT TER	MINAL		PROJECT 232932-	OR CONTRAC	CT NO	
(1)	(2) 9 sp	(3)	t	M	T	_	TH			S (S	5)	(6)	(7)	-		QEDI	(8) JCTIONS			9+
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO OF WITH-BLONG EVENIPTIONS	WORK CLASSIFICATION	or oast	25	26	27	28	29		31 10	TAL	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX	INSURANCE	441 K	OTHER	TOTAL DEDUCTIONS	WAGES PAID
RODOLFO CASTILLO 7626	1	FINISHER	٥									2000 per	/					OTTLE	DEDOCTIONS.	TON WEEP
PEDRO JUAREZ 2457	Ľ	FINISHER	s		11 00	* 411	es (JÚ)	de typy	\downarrow	20	.50	Week	2000							2000
PEDRO JUANEZ 2457		FINISHER	8		F1 fgr	0 00	ia proje	0.00		20).5(1	250 per Day	500							500
DAMIAN SHAW 3417		OPERATOR	0									250 per	300							
GIOVANNI RESCINOS 5734		FINISHER	8		F) 1 ₈₁	00 ((()	22 JHP	m 43E1	\perp	20	.50	Day	500							500
GIOVAGNI REGUINOS 1754		FINISHER	8		a 100	40 (8)	er (lib	9 liqu	+	20	.50	250 per Day	500							500
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White completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or essisted construction contracts to respond to the intermation collection contracts and subcontractors and subcontractors and subcontractors performing work on Federally financed or assisted construction contracts to "turnish weekly a statement with respect to the wages paid each employee during the proceduring week." U.S. Department of Lebor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(a) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborator mechanic has been paid not less than the proper Davis-Bacon provailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that annuloyees have received lugally required wages and single center.

Public Burden Statement

We estimate that is will take an everage of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division. U.S. Department of Labor, Roum 93502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date _	4-1-2024			(b) WHERE FRINGE BENEFITS ARE PA	ID IN CASH							
	CHRISTINA CASTILLO	PAYROLL										
·	(Name of Signatory Party)	(Title)		Each laborer or mechan as indicated on the pay	nic listed in the above referenced payroll has been paid, roll, an amount not less than the sum of the applicable							
do here	by state:			basic hourly wage rate	plus the amount of the required fringe benefits as listed as noted in section 4(c) below							
(1) That I pay or supervise the payment of the perso	ins employed by			ss notes in section 4(c) below							
	CASTILLOS LABO	OR LLC	on the	(c) EXCEPTIONS								
	(Contractor or Subcontr	actor)	0// 0/10	EXCEPTION (CRAFT)	EXPLANATION							
		; that during the payroll period commenc	ing on the									
	(Building or Work)											
25		g the 31 day of MARCH	2024									
	ons employed on said project have been paid the rwill be made either directly or Indirectly to or on b		es have									
	CASTILLOS LABOR	LLC	rom the full									
	(Contractor or Subcon											
from the 3 (29 C	wages earned by any person and that no deducti e full wages earned by any person, other than pen F.R. Subtitle A), issued by the Secretary of Labor 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 314	nissible deductions as defined in Regular under the Copeland Act, as amended (4	tions, Part									
			RE	MARKS:								
correct applical set forti (3) program Training	That any payrolls otherwise under this contract in and complete; that the wage rates for laborers or ble wage rates contained in any wage determination therein for each laborer or mechanic conform with That any apprentices employed in the above perion registered with a State apprenticeship agency regulated the properties of Labor, or if no such Bureau of Apprenticeship and Training, United States	mechanics contained therein are not less in incorporated into the contract; that the hithe work he performed. Indicate the discrete discr	s than the classifications enticeship									
(4)	That:											
	(a) WHERE FRINGE BENEFITS ARE PAID TO	APPROVED PLANS, FUNDS, OR PROC	GRAMS NAI	ME AND TITLE IRISTINA CASTILLO	SIGNATURE							
	- in addition to the basic hourly was	e rates paid to each laborer or mechanic	c listed in									
	the above referenced payroll, pay	ments of fringe benefits as listed in the priate programs for the benefit of such en	nolovees. THE	E WILLFUL FALSIFICATION OF ANY OF THE ABOV BCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTI LE 31 OF THE UNITED STATES CODE	E STATEMENT SUBJECT THE CONTRACTOR OR ON SEE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF							

U.S. Department of Labor Wage and Hour Division

PAYROLL



For contractor's optional use; see Instructions at dol.gov/agencies/whd/forms/wh347

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OR SUBCONTRACTOR CONTRACTOR CONTR											ADDRE	SS 69 POPL GREAT F		OMB No. 1235-0008 Expires 09/30/2026						
PAYROLL NO 3		FOR WEEK ENDI		4/07/	2024	1					PROJE HILTI	CT AND LOCATI ON HEAD IS OVEMENTS	ION LAND AIRPO PHASE 1	ORT TE	RMINAL		PROJECT 232932-	OR CONTRAC	OT NO	
(1)	(2) SNAC	(3)	ST	М			TH		S	S	(5)	(6)	(7)			DED	(8) UCTIONS		***	(9)
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			s	10 50	10:541	3 00	17 (1)	7 (30)			42.00	250.00 daily								1,250
DAMIAN SHAW 3417		OPERATOR	0		141 911	3 100	17 646	7 861				250.00 daily							-	1,250
GIOVANNI RESCINOS 5734		FINISHER	0		115 501	1 (3)	11 plike	S or D			42.00	250.00 daily								4.050
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			9				\dashv	\dashv	+	-	_									

White completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contractor performing work on Federally financed or assisted construction contracts to respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DCL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all psyridis to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the psyridis are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the Information to determine that employees have received legally required wages and fringe benefits

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gethering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other sepect of the collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room \$3502, 200 Constitution Avenue, N.W.

Date4-9-20	024			(b) WHERE FRINGE BENEFITS ARE PAID	IN CACU							
. CHRI	STINA CASTILLO	PAYROLL		(b) WILLIE I NAIGE BEITEFITS ARE PAID	IN CASH							
,	of Signatory Party)	(Title)		Each laborer or mechanic	listed in the above referenced payroll has been paid,							
do hereby state:				as indicated on the payroll, an amount not less than the sum of the application basic hourly wage rate plus the amount of the required fringe benefits as in the contract, except as noted in section 4(c) below.								
(1) That I pay o	r supervise the payment of the persons e	mployed by			loted in section 4(c) below.							
	CASTILLOS LABOR L	LC		(c) EXCEPTIONS								
	(Contractor or Subcontractor)	on the	EXCEPTION (CRAFT)	EXPLANATION							
HILTON H	EAD ISLAND AIRPORT ; then	during the payroll period comme	ncing on the		Crd Enteritory							
(Buik	ding or Work)	7 ADDII	2024									
day of		7 day of APRIL										
all persons employed been or will be made	I on said project have been paid the full w either directly or Indirectly to or on behalf	eeldy wages earned, that no reb of seld	ates have									
	CASTILLOS LABOR LLO		from the full									
	(Contractor or Subcontractor	or)										
from the full wages ea	d by any person and that no deductions harned by any person, other than permissil A), issued by the Secretary of Labor under 967; 76 Stat. 357; 40 U.S.C. § 3145), an	ble deductions as defined in Regular the Concland Act, as amended	lations Part									
				REMARKS								
correct and complete applicable wage rates set forth therein for ex (3) That any appr program registered w Training, United State	rrolls otherwise under this contract require; that the wage rates for laborers or mech contained in any wage determination incach laborer or mechanic conform with the rentices employed in the above period are tith a State apprenticeship agency recogniss Department of Labor, or if no such recoprenticeship and Training, United States I	nanics contained therein are not li orporated into the contract; that the work he performed. I duly registered in a bone fide apprentices and by the Bureau of Apprentices and zed agency exists in a State.	ess than the ne classifications prenticeship									
	in addition to the basic hourly wage rate the above referenced payroll, payments have been or will be made to appropriate except as noted in section 4(c) below.	es paid to each laborer or mecha s of frince benefits as listed in the	nic listed in	NAME AND TITLE CHRISTINA CASTILLO THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE ST SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION TITLE 31 OF THE UNITED STATES CODE	ATEMENTS MAY SUBJECT THE CONTRACTOR OR SEE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF							

U.S. Department of Labor Wage and Hour Division

PAYROLL For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347



Persons are not required to reapond to the collection of information unless it displays a currently valid OMB control number. NAME OF CONTRACTOR OR SUBCONTRACTOR ADDRESS 69 POPLAR STREET OMB No. 1235-0008 **GREAT FALLS, SC 29055** CASTILLOS LABOR LLC Expires 09/30/2026 **PAYROLL NO** FOR WEEK ENDING PROJECT AND LOCATION
HILTON HEAD ISLAND AIRPORT TERMINAL PROJECT OR CONTRACT NO. 04/14/2024 **IMPROVEMENTS PHASE 1** 232932-CON08 (1) (2) (3) (4) DAY AND DATE (9) (8) DEDUCTIONS M T w TH F S S NAME AND INDIVIDUAL IDENTIFYING NUMBER GROSS WITH 9 10 13 INSURANC WAGES 11 12 401 K (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY WORK TOTAL RATE AMOUNT HOLDING TOTA PAID NUMBER) OF WORKER CLASSIFICATION HOURS WORKED EACH DAY EARNED FICA TAX OTHER DEDUCTIONS FOR WEEK **RODOLFO CASTILLO 7626 FINISHER** 2,000 1 weekly 2,000 47.00 iem. (3.19) 640 **PEDRO JUAREZ 2457 FINISHER** 250.00 daily 10.00 A 00 47.00 1,250 **DAMIAN SHAW 3417 OPERATOR** 250.00 daily lea 13,00 6 100 ji nn 47.00 1.250 **GIOVANNI RESCINOS 5734 FINISHER** 250.00 daily James () con 47.00 1,000 . **MIGUEL ZAVALA 5463** LABORER 250,00 daily 1.000 10.00 10 60 13 00 47.00 **DAVID JUAREZ 5098** LABORER 180.00 daily 720.00 47.00 100 000 13.40 40 0

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 9.3, 5.5(e) The Coperand Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages peld each employee during the preceding week." U.S. Department of Labor (DOU) regulations at 29 C.F.R. § 5.5(e)(3)(ii) require confractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or machanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and france benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, eserching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other espect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor. Room 83502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date	4-16-2024							
	CHRISTINA CASTILLO	PAYROLL		(b) WHERE FRINGE	BENEFITS ARE PAID I	N CASH		
١	(Name of Signatory Party)	(Title)		☐ - Es	ch laborer or mechanic it	sted in the above referenced payroll I	as b	een paid,
do hereby		(1100)		bar	sic hourly wage rate plus	an amount not less than the sum of t the amount of the required fringe bar	elite	plicable as listed
(1) 1	: That I pay or supervise the payment of the p	troop amplaced by		in 1	the contract, except as no	oted in section 4(c) below.		
(1)	CASTILLOS LA			(c) EXCEPTIONS				
	(Contractor or Subco		on the	EVOCATION				
Н	ILTON HEAD ISLAND AIRPORT	: that during the payroli period con	tenencina on the	EXCEPTION	N (CRAFI)	EXPLANATION		
	(Building or Work)							
8		iding the 14 day of APRIL						
all person been or w	ns employed on said project have been peld to vill be made either directly or indirectly to or o	the full weekly wages earned, that no on behalf of said	rebates have					
	CASTILLOS LAB	OR LLC	from the full					
	(Contractor or Sub-	contractor)						
weekly w	ages earned by any person and that no ded	uctions have been made either directly	or indirectly					
3 (29 C.F.	full wages earned by any person, other than R. Subtitle A), issued by the Secretary of La	bor under the Constant Act, as amon	egulations, Parl ded (48 Stat. 948,					
63 Stat 1	08. 72 Stat. 967: 76 Stat. 357: 40 U.S.C. § 3	1145), and described below:						
						North State of the		
				REMARKS:				
(2) T	had an							
correct an	hat any payrolls otherwise under this contra nd complete; that the wage rates for laborers	or mechanics contained therein are n	of less than the					
applicable	wage rates contained in any wage determin herein for each laborer or mechanic conform	ation incorporated into the contract: the	at the classifications					
(3) Th	hat any apprentices employed in the above p registered with a State apprenticeship agenc	eriod are duly registered in a bona fide	apprenticeship					
i raining, l	United States Department of Labor, or if no s	such recognized agency eviete in a Stell	tesnip and te, are registered					
with the B	ureau of Apprenticeship and Training. United	States Department of Labor						
(4) Th		TO ADDROVED BY AND THE PARTY OF						
	(a) WHERE FRINGE BENEFITS ARE PAID	TO APPROVED PLANS, FUNDS, OR	PROGRAMS	NAME AND TITLE CHRISTINA CASTILLO		SIGNATURE		
	- in addition to the basic hourly v	vage rates paid to each laborer or me	chanic listed in			9		
	the above referenced payroll, i	payments of fringe benefits as listed in propriate programs for the benefit of st	n the contract	THE WILLFUL FALSIFICATION	OF ANY OF THE ABOVE STA	HE SECTION 100 OF TITLE 18 AND SECTION	R OR	
	except as noted in section 4(c) !	propriate programs for the benefit of st below.	ion employees,	TITLE 31 OF THE UNITED STATE	R CRIMINAL PROSECUTION. S ES CODE	SEE SECTION 100 OF TITLE 18 AND SECTI	DN 37	29 OF
							-	

Wage and Hour Division

PAYROLL

WAGE AND HOUR DIVISION
Revised December 2008

For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347 Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number

OR SUBCONTRACTOR NAME OF CONTRACTOR ADDRESS 69 POPLAR STREET OMB No. 1235-0008 **GREAT FALLS, SC 29055** Expires 09/30/2026 CASTILLOS LABOR LLC PROJECT OR CONTRACT NO. PAYROLL NO. FOR WEEK ENDING PROJECT AND LOCATION
HILTON HEAD ISLAND AIRPORT TERMINAL 5 04/21/2024 **IMPROVEMENTS PHASE 1** 232932-CON08 (1) (3) (4) DAY AND DATE (9)NO OF WITHHOLDING EXEMPTIONS **DEDUCTIONS** W TH F S S M NET NAME AND INDIVIOUAL IDENTIFYING NUMBER GROSS WITH-INSURANC WAGES 15 17 20 401 K 16 18 19 21 (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY WORK TOTAL RATE AMOUNT HOLDING TOTAL PAID HOURS NUMBER) OF WORKER CLASSIFICATION HOURS WORKED EACH DAY OF PAY EARNED FICA TAX OTHER EDUCTIONS FOR WEEK **RODOLFO CASTILLO 7626 FINISHER** 0 2.000 2.000 1 weekly 43.50 K 50 In op 10.00 17.4361 **PEDRO JUAREZ 2457** FINISHER 0 250.00 1,250 daily 43.50 # 50 In se 10.00 **DAMIAN SHAW 3417 OPERATOR** 250.00 0 daily 1.250 3 i i gje + 50 110 100 100 140 43.50 **GIOVANNI RESCINOS 5734 FINISHER** 250.00 daily 1.250 43.50 4 181 100 (00) . 116 BH 00+ **DAVID JUAREZ 5098** LABORER 180.00 900.0 daily ** ** 43.50 0 0

White completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or sesisted construction contracts to respond to the information collection contained in 29 C.F.R. § § 3.3 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weakly a statement with respect to the wages paid each employee during the praceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information to determine that employees have received legally required ways and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor. Room \$3502, 200 Constitution Avenue. N.W. Washington. D.C. 20210

Date4-22-2024			
. CHRISTINA CASTILLO	PAYROLL	(b) WHERE FRINGE BENEFITS ARE PAID	IN CASH
(Name of Signatory Party) do hereby state:	(Title)	as indicated on the payroll,	isted in the above referenced payroll has been paid, an amount not less than the sum of the applicable the amount of the required fringe benefits as listed
(1) That I pay or supervise the payment of the pers CASTILLOS LAB		(c) EXCEPTIONS	loted in section 4(c) below.
(Contractor or Subcont HILTON HEAD ISLAND AIRPORT (Building or Work)	on the	EXCEPTION (CRAFT)	EXPLANATION
all persons employed on said project have been paid the	ng the 21 day of APRIL 2024, of ull weekly wages earned, that no rebates have		
been or will be made either directly or indirectly to or on CASTILLOS LABOR	R LLC from the full		
(Contractor or Subcorweekly wages earned by any person and that no deduct from the full wages earned by any person, other than person, other than person (29 C.F.R. Subtitle A), issued by the Secretary of Labor 63 Stat. 108, 72 Stat. 967, 76 Stat. 357; 40 U.S.C. § 314	tions have been made either directly or indirectly rmissible deductions as defined in Regulations, Part		
(2) That any payrolls otherwise under this contract correct and complete; that the wage rates for laborers or applicable wage rates contained in any wage determinable set forth therein for each laborer or mechanic conform with the conformination of the second of the s	r mechanics contained therein are not less than the on incorporated into the contract; that the classification ith the work he performed. iod are duly registered in a bona fide apprenticeship accognized by the Bureau of Apprenticeship and th recognized agency exists in a State are registered.	REMARKS:	
in addition to the basic hourly way the above referenced payroll, par	D APPROVED PLANS, FUNDS, OR PROGRAMS ge rates paid to each laborer or mechanic listed in yments of fringe benefits as listed in the contract opriate programs for the benefit of such employees, ow.	NAME AND TITLE CHRISTINA CASTILLO THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE ST. SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION TITLE 31 OF THE UNITED STATES CODE	SIGNATURE ATEMENTS MAY BUBLECT THE CONTRACTOR OR SEE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF

Wage and Hour Division

PAYROLL

WAGE AND HOUR DIVISION Revised December 2008

For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. NAME OF CONTRACTOR OR SUBCONTRACTOR ADDRESS 69 POPLAR STREET OMB No. 1235-0008 **GREAT FALLS, SC 29055** CASTILLOS LABOR LLC Expires 09/30/2026 PROJECT ON CONTRACT NO PAYROLL NO FOR WEEK ENDING PROJECT AND LOCATION
HILTON HEAD ISLAND AIRPORT TERMINAL 6 04/28/2024 IMPROVEMENTS PHASE 1 232932-CON08 (4) DAY AND DATE (3) 191 DEDUCTIONS T W TH F S NET NAME AND INDIVIOUAL IDENTIFYING NUMBER **GROSS** 22 23 24 25 26 27 INSURANC 401 K WAGES 28 (e.g.: LAST FOUR DIGITS OF SOCIAL SECURITY. WORK TOTAL RATE **AMOUNT** HOLDING DEDUCTIONS PAID NUMBER) OF WORKER CLASSIFICATION HOURS WORKED EACH DAY EARNED FICA TAY OTHER FOR WEEK **RODOLFO CASTILLO 7626 FINISHER** 2,000 1 weekly 33.50 98 s46 s 2,000 PEDRO JUAREZ 2457 **FINISHER** 250.00 daily 33.50 1.250 **DAMIAN SHAW 3417 OPERATOR** 250.00 daily 33.50 1.250 **GIOVANNI RESCINOS 5734 FINISHER** 250.00 daily 33.50 1,250 **DAVID JUAREZ 5098** LABORER 180.00 daily 900.00 4 00 33.50

While completion of Form WH-347 is optional, it is mandatory for covered contractors performing work on Federally financed or assisted construction contracts to respond to the information collection contracted in 29 C F R §§ 3 J 5 that The Later-Let Act
(40 U S C § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." US Department of Liebur (DUL) regulations
29 C F R § 5 5/3 (3) in require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and wagus and times been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this Information review the information to determine that employees have received legally required wagus and times benefits

Public Burden Statement

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Date4-29-2024		(b) WHERE FRINCE RENEETS ARE BAID IN CAR	
CHRISTINA CASTILLO	PAYROLL	(b) WHERE FRINGE BENEFITS ARE PAID IN CAS	"
(Name of Signatory Party)	(Title)	Each laborer or mechanic listed in as indicated on the payroll, as any	the above referenced payroll has been paid, ount not less than the sum of the applicable
do hereby state:		basic hourly wage rate plus the an in the contract, except as noted in	tount of the required fringe benefits as listed
(1) That I pay or supervise the payment of the persons e	imployed by		Section 4(c) delow
CASTILLOS LABOR L	LC	(c) EXCEPTIONS	
(Contractor or Subcontracto	r) on the	EXCEPTION (CRAFT)	EXPLANATION
HILTON HEAD ISLAND AIRPORT ; the	at during the payroll period commencing on the		
	28 day of APRIL 2024		
all persons employed on said project have been paid the full w been or will be made either directly or indirectly to or on behalf	veekly wages earned, that no rebates have		
CASTILLOS LABOR LL	C from the full		
(Contractor or Subcontract	or)		
weekly wages earned by any person and that no deductions from the full wages earned by any person, other than permissi 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor und 63 Stat 108, 72 Stat 967, 76 Stat 357, 40 U.S.C. § 3145), and	ble deductions as defined in Regulations, Part er the Copeland Act, as amended (48 Stat. 948		
		9	
		REMARKS:	
(2) That any payrolls otherwise under this contract requires correct and complete; that the wage rates for laborers or mecapplicable wage rates contained in any wage determination into set forth therein for each laborer or mechanic conform with the (3) That any apprentices employed in the above period are program registered with a State apprenticeship agency recogn Training, United States Department of Labor, or if no such recognition that the Bureau of Apprenticeship and Training, United States	hanics contained therein are not less than the corporated into the contract; that the classifications work he performed. e duly registered in a bona fide apprenticeship sized by the Bureau of Apprenticeship and contract are registered.		
(4) That:			
(a) WHERE FRINGE BENEFITS ARE PAID TO APP	PROVED PLANS, FUNDS, OR PROGRAMS	NAME AND TITLE CHRISTINA CASTILLO	TURE
the above referenced payroll, payment have been or will be made to appropriat	es paid to each laborer or mechanic listed in its of fringe benefits as listed in the contract e programs for the benefit of such employees,	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMEN SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION SEE SEC	TS MAY SUBJECT THE CONTROCTOR OR TION 1001 OF TITLE 18 AND SECTION \$729 OF
except as noted in section 4(c) below.		TITLE 31 OF THE UNITED STATES CODE	

Wage and Hour Division

PAYROLL



For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

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NAME OF CONTRACTOR OR SUBCONTR	1	ADDRES		OMB No. 1235-0008 Expires 09/30/2026											
PAYROLL NO.	Master St	FOR WEEK ENDIN		20/2024		PROJEC Hilton 120 B	T AND LOCATION Head Island	on I Airport Term d., Hilton Hea	inal Impr	ovements-l SC 29926	Phase 1	PROJECT O	PR CONTRAC		30/2020
(1)	(2) SNO	(3)	OR ST.	(4) DAY AND DATE		(5) (6)		(7)			DED	(8) UCTIONS			(9) NET
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	OT.0	HOURS WORKED EACH DA	AY F	TOTAL	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX			OTHER	TOTAL DEDUCTIONS	NET WAGES PAID FOR WEEK
NONE			o												
			0												
	-		s			_									
			s												
			0												
40.5			0												
			s												
			0		+	-									0
7		Tr.	0												
			s												
			o												
2 7,00010			1				****				llastia - valda	1	D 00000	E(a) The Consist	4.4.4

While completion of Form WH-347 is optional, it is mandatory for covered contractors performing work on Federally financed or assisted construction contracts to respond to the information collection contrained in 29 C.F.R. §§ 3.4, and to CODE and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a cape during the preceding week." U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a cape during the preceding week." U.S.C. § 3145) contractors and subcontractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contracts to respond to the information collection contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contracts to respond to the information contracts to respond to th

Public Burden Statement

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Date04/22/2024			(b) WHERE FRINGE BENEFITS ARE PA	AID IN CASH
Clay Laird	Project Manager		_	
(Name of Signatory Party)	(Title)			inic listed in the above referenced payroll has been paid, yroll, an amount not less than the sum of the applicable
do hereby state:			basic hourly wage rate	plus the amount of the required fringe benefits as listed as noted in section 4(c) below.
(1) That I pay or supervise the payment of the	persons employed by		•	25 Hotel III 3550011 -4(0) 5510W.
Master Ste	el, LLC.	an tha	(c) EXCEPTIONS	
(Contractor or Subo	<u> </u>	on the	EXCEPTION (CRAFT)	EXPLANATION
HHI Airport Terminal Improvements - PH	that during the payroll period comment	ncing on the		
20th day of December , 2023 , and e	ending the 19th day of April	_, 2024_,		
all persons employed on said project have been paid been or will be made either directly or indirectly to or		ates have	2	
Master Steel	, LLC.	from the full		
(Contractor or Sub	ocontractor)			
weekly wages earned by any person and that no de from the full wages earned by any person, other than 3 (29 C.F.R. Subtitle A), issued by the Secretary of L 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. §	permissible deductions as defined in Regulator abor under the Copeland Act, as amended	lations, Part		
		Ì	REMARKS:	
(2) That any payrolls otherwise under this controcorrect and complete; that the wage rates for labore applicable wage rates contained in any wage determined to the therein for each laborer or mechanic conformation.	rs or mechanics contained therein are not le ination incorporated into the contract; that the	ess than the		
(3) That any apprentices employed in the above program registered with a State apprenticeship agen Training, United States Department of Labor, or if no with the Bureau of Apprenticeship and Training, United	cy recognized by the Bureau of Apprentices such recognized agency exists in a State, a	hip and		
(4) That: (a) WHERE FRINGE BENEFITS ARE PAIL	D TO APPROVED PLANS, FUNDS, OR PR	OGRAMS	NAME AND TITLE Clay Laird, Project Manager	SIGNATURE Digitally signed by Clayton Laird DN: C=US, E=claird@master-steel.net, O=Master Steel, CN=Clayton Laird
in addition to the basic hourly	wage rates paid to each laborer or mecha			Reason: Approved As Noted Date: 2024 04 23 16:14:21-04:00'
the above referenced payroll	, payments of fringe benefits as listed in tappropriate programs for the benefit of such	the contract employees.		VE STATEMENTS MAY SUBJECT THE CONTRACTOR OR TION. SEE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF
except as noted in section 4(c	,			

Contractor Quality Electrical Systems, Inc. Po Box 1405 Beaufort, SC 29901

Project

Edison Foard:HHI airport PO Box 19888

Charlotte, NC 28219-0888

Project/Contract #
Payroll Number
For Week Ending

2/28/2024

					- 1	Hours	AAOLK	ea 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	22	23	24	25	26	27	28	Hours	Hours	Rate	Gross Pay	Rate Number	Gross Pay	Security	care	Tax	Tax	Other	Deduct	Net Pay
Daniel L. Scarborough	6670	Hourly Regular Rate	RT	5.50)			4.50			10.00	10.00	26.00	260.00	0.96 Draft	1,098.50	68.10	15.92	121.00	56.98	0.00	262.00	836.50
Demille M. Parker JR	6949	Hourly Regular Rate	RT	5.50				4.50			10.00	10.00	18.00	180.00	0.00 Draft	760.50	47.15	11.03	53.00	19.13	0.00	130.31	630.19
Garry A. Brigmon	2754	Hourly Regular Rate	RT	9.00		10.00		10.00	1.00	10.00	40.00	40.00	34.00	1,360.00	0.99 Draft	2,023.00	125.43	29.34	270.00	116.14	0.00	540.91	1,482.09
Garry A. Brigmon	2754	Overtime	RT	1					11.00	2.00	13.00	13.00	51.00	663.00	1.48 Draft	2,023.00	125.43	29.34	270.00	116.14	0.00	540.91	1,482.09

Date: Apr-22, 2024 I, Nathan Sanborn , owner, do hereby state:		
	ect Edison Foard:HHI airport; that during the payroll period commencing on Feb-22, 2024 and ending on Feb-28, 2024 all persons employed on the said project han behalf of said Quality Electrical Systems, Inc. from the full weekly wages earned by any person, other than permissible deductions as defined in Regulations, Pa 108, 72 Stat. 967, 76 Stat 357, 40 U.S.C. 276c), and described below:	
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he	d complete; that the wage rates for laborers and mechanics contained therein are not less than the applicable wage rates contained in any wage determination in performed.	corporated
(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 Labor, of it no such recogniced to the contract of Labor, of it no such recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, of it no such recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, of it no such recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, of it no such recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, of it no such recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, of it no such recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, of it no such recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, of it no such recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, of it no such recognized by the Bureau of Apprenticeship and Training a	gnized
(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 laborar or mechanic listed in the air noted in Section 4(c) below.	bove 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	is, except as
(b) WHERE FRINGE BENEFITS ARE PAID IN CASH Each laborer or mechanic listed in the above referenced payroll has been paid, as indical as noted in Section 4(c) below.	ited 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 contra	ict, except
(c) EXCEPTIONS		
Exception (Craft)	Explanation	
Remarks		
Name and Title Nathan Sanborn , owner	Signature	
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CO OF TITLE 31 OF THE UNITED STATES CODE.	INTRACTOR OR SUBCOMPACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231	

Contractor Quality Electrical Systems, Inc. Po Box 1405 Beaufort, SC 29901

Project

Edison Foard:HHI airport PO Box 19888 Charlotte, NC 28219-0888

Project/Contract # Payroli Number For Week Ending

5 3/6/2024

					по	urs 1	AOLKA	a by ba	ay .														
		Work	Pay	Thu	Fri	Sat	Sun	Mon 1	Tue	Wed	Timesheet				Fringe Check		Social					Total	
Employee Name	ID	Classification	Type	29	1	2	3	4	5	6	Hours	Hours	Rate	Gross Pay	Rate Number	Gross Pay	Security	care	Tax	Tax	Other	Deduct	Net Pay
Garry A. Brigmon	2754	Hourly Regular Rate	RT	11.00	6.00	8.00		9.00 6	3.00		40.00	40.00	34.00	1,360.00	0.95 Draft	2,125.00	131.75	30.81	292.00	122.67	0.00	577.23	1,547.77
Garry A. Brigmon	2754	Overtime	RT					5	5.00	10.00	15.00	15.00	51.00	765.00	1.43 Draft	2,125.00	131.75	30.81	292.00	122.67	0.00	577.23	1,547.77

I, Nathan Sanborn , owner, do hereby state:	
(1) That I pay or supervise the payment of the persons employed by Quality Electrical Systems, Inc. on the project paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on b CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 10	t Edison Foard:HHI airport; that during the payroll period commencing on Feb-29, 2024 and ending on Mar-06, 2024 all persons employed on the said project have been chalf of said Quality Electrical Systems, Inc. from the full weekly wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 8, 72 Stat. 967; 76 Stat 357; 40 U.S.C. 276c), and described below:
into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he p	
(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	registered with a State apprenticestrip agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, of if no such recognized tof Labor.
(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 aborded in Section 4(c) below.	ove 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, except as
(b) WHERE FRINGE BENEFITS ARE PAID IN CASH Each laborer or mechanic listed in the above referenced payroll has been paid, as indicate as noted in Section 4(c) below.	d 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
(c) EXCEPTIONS	
Exception (Craft)	Explanation
Remarks:	
Name and Title Nathan Sanborn , owner	Signature
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CON OF TITLE 31 OF THE UNITED STATES CODE.	TRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231

Date: Apr-22, 2024

Contractor Quality Electrical Systems, Inc. Po Box 1405

Beaufort, SC 29901

Project

Edison Foard:HHI airport PO Box 19888

Charlotte, NC 28219-0888

Project/Contract # Payroll Number For Week Ending

6 3/13/2024

					He	ours V	Vorke	d by D	ay															
		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	7	8	9	10	11	12	13	Hours	Hours	Rate	Gross Pay	Rate	Number	Gross Pay	Security	care	Tax	Tax	Other	Deduct	Net Pay
Daniel L. Scarborough	6670	Overtime	RT	1						1.50	1.50	1.50	39.00	58.50	1.26	Draft	1,332.50	82.62	19.33	173.00	71.95	0.00	346.90	985.60
Daniel L. Scarborough	6670	Hourly Regular Rate	RT							10.00	10.00	10.00	26.00	260.00	0.84	Draft	1,332.50	82.62	19.33	173.00	71.95	0.00	346.90	985.60
Demille M. Parker JR	6949	Hourly Regular Rate	RT							10.00	10.00	10.00	18.00	180.00	0.00	Draft	639.00	39.62	9.26	39.00	12.13	50.00	150.01	488.99
Garry A. Brigmon	2754	Hourly Regular Rate	RT	10.00	4.00	12.00			10.00	12.00	48.00	48.00	34.00	1,632.00	1.09	Draft	1,632.00	101.18	23.66	184.00	91.12	0.00	399.96	1,232.04

I, Nathan	Sanborn , owner, do hereby state:		
paid the fu		ct Edison Foard:HHI airport; that during the payroll period commencing on Mar-07, 2024 and ending on Mar-13, 2024 all persons employed behalf of said Quality Electrical Systems, Inc. from the full weekly wages earned by any person, other than permissible deductions as defin 08, 72 Stat. 967; 76 Stat 357; 40 U.S.C. 276c), and described below:	
	y payrolls otherwise under this contract required to be submitted for the above period are correct and thract; that the classifications set forth therein for each laborer or mechanic conform with the work he p	complete; that the wage rates for laborers and mechanics contained therein are not less than the applicable wage rates contained in any wage rates.	rage determination Incorporated
	y apprentices employed in the above period are duly registered in a bona fide apprenticeship programs ats in a State, are registered with the Bureau of Apprenticeship and Training, United States Department	registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor.	or, of if no such recognized
(4) That:			
(a) Wh	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 ab noted in Section 4(c) below.	ove referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefits	efit of such employees, except as
(b) WH	ERE FRINGE BENEFITS ARE PAID IN CASH Each laborer or mechanic listed in the above referenced payroll has been paid, as indicate as noted in Section 4(c) below.	ed 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
(c) EX	CEPTIONS		
	Exception (Craft)	Explanation	
	Damedon .		
	Remarks:		
	Name and Title Nathan Sanborn , owner	Signature	

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.

Date: Apr-22, 2024

Contractor Quality Electrical Systems, Inc. Po Box 1405

Beaufort, SC 29901

Project

Edison Foard:HHI airport PO Box 19888

Charlotte, NC 28219-0888

Project/Contract # Payroll Number For Week Ending

3/20/2024

					HC	ours a	AOLKS	z by Da	у															
		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	14	15	16	17	18	19	20	Hours	Hours	Rate	Gross Pay	Rate	Number	Gross Pay	Security	care	Tax	Tax	Other	Deduct	Net Pay
Daniel L. Scarborough	6670	Hourly Regular Rate	RT	10.00						0.50	10.50	10.50	26.00	273.00	0.56	Draft	2,249.00	139.44	32.61	378.00	130.61	0.00	680.66	1,568.34
Daniel L. Scarborough	6670) Overtime	RT	1.50					70.07	1.50	3.00	3.00	39.00	117.00	0.85	Draft	2,249.00	139.44	32.61	378.00	130.61	0.00	680.66	1,568.34
Demille M. Parker JR	6949	Hourly Regular Rate	RT	11.50						2.00	13.50	13.50	18.00	243.00	0.00	Draft	621.00	38.50	9.01	36.00	11.09	50.00	144.60	476,40
Garry A. Brigmon	2754	Hourly Regular Rate	RT	10.00				10.00	10.00	10.00	40.00	40.00	34.00	1,360.00	0.82	Draft	2,558.50	158.63	37.10	393.00	150.42	0.00	739.15	1,819.35
Garry A. Brigmon	2754	1 Overtime	RT		10.00	13.50					23.50	23.50	51.00	1,198.50	1.24	Draft	2,558.50	158.63	37.10	393.00	150.42	0.00	739.15	1,819.35

Date: Apr-22, I, Nathan San	2024 born , owner, do hereby state:		
paid the full we	or supervise the payment of the persons employed by Quality Electrical Systems, Inc. on the project letty wages earned, that no rebates have been or will be made either directly or indirectly to or on to a), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 10).	at Edison Foard:HHI airport; that during the payroll period commencing on Mar-14, 2024 and ending on Mar-20, 2024 all persons employed pehalf of said Quality Electrical Systems, Inc. from the full weekly wages earned by any person, other than permissible deductions as defined by 2015 and 40 to 10 to	on the said project have been ed in Regulations, Part 3 (29
-			
	syrolls otherwise under this contract required to be submitted for the above period are correct and ct; that the classifications set forth therein for each laborer or mechanic conform with the work he p	complete; that the wage rates for laborers and mechanics contained therein are not less than the applicable wage rates contained in any westormed.	rage determination Incorporated
	prentices employed in the above period are duly registered in a bona fide apprenticeship program in a State, are registered with the Bureau of Apprenticeship and Training, United States Departmen	registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Lab at of Labor.	or, of if no such recognized
(4) That:			
(a) WHER	E 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 about noted in Section 4(c) below.	ove referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefits	afit of such employees, except as
(b) WHER	E FRINGE BENEFITS ARE PAID IN CASH Each laborer or mechanic listed in the above referenced payroll has been paid, as indicate as noted in Section 4(c) below.	od 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
(c) EXCEP	TIONS		
E	cception (Craft)	Explanation	
<u> </u>			
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Re	marks:		
L			
1	ame and Title athan Sanborn , owner	Signature	

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 THE UNITED STATES CODE.

Contractor Quality Electrical Systems, Inc. Po Box 1405

Beaufort, SC 29901

Project

Edison Foard:HHI airport PO Box 19888

Project/Contract # Payroll Number For Week Ending

8

Charlotte, NC 28219-0888

3/27/2024

				110	mio as	OINGU	, .	· ay														
	Work	Pay	Thu	Fri	Sat 5	Sun I	Mon	Tue	Wed	Timesheet	Paid	Pay	Job	Fringe Check	Total	Social	Medi-	Federal	State		Total	
(D	Classification	Type	21	22	23	24	25	26	27	Hours	Hours	Rate	Gross Pay	Rate Number	Gross Pay	Security	care	Tax	Tax	Other		Net Pay
6670	Hourly Regular Rate	RT				1	2.50	11.50	7.00	31.00	31.00	27.00	837.00	0.93 Draft	1,262.25	78.26	18.30	157.00				
6670	Overtime	RT							4.50	4.50	4.50	40.50	182.25	1.40 Draft	1,262.25	78.26	18.30	157.00	67.46	50.00	371.02	891.23
6949	Hourly Regular Rate	RT				1	1.50	11.50	4.00	27.00	27.00	18.00	486.00	0.00 Draft	486.00	30.13	7.05	21.00	5.81	0.00	63.99	422.01
2754	Hourly Regular Rate	RT	10.00			1	1.00	9.00	10.00	40.00	40.00	36.00	1,440.00	1.09 Draft	2,034.00	126.11	29.49	272.00	116.85	0.00	544.45	1,489.55
2754	Overtime	RT		3.00 8	3.00					11.00	11.00	54.00	594.00	1.63 Draft	2,034.00	126.11	29.49	272.00	116.85	0.00	544.45	1,489.55
	6670 6670 6949 2754	ID Classification 6870 Hourly Regular Rate 6870 Overtime 6949 Hourly Regular Rate	ID Classification Type 6870 Hourly Regular Rate RT 6870 Overtime RT 6949 Hourly Regular Rate RT 2754 Hourly Regular Rate RT	ID Classification Type 21 6870 Hourly Regular Rate RT 6870 Overtime RT 6949 Hourly Regular Rate RT 2754 Hourly Regular Rate RT 10.00	Work Pay Thu Fri 1D Classification Type 21 22 6670 Hourly Regular Rate RT 6670 Overtime RT 6949 Hourly Regular Rate RT 2754 Hourly Regular Rate RT 10.00	Work Pay Thu Fri Sat 3 1D Classification Type 21 22 23 6670 Hourly Regular Rate RT 6670 Overtime RT 6949 Hourly Regular Rate RT 2754 Hourly Regular Rate RT 10.00	Work ID Classification Pay Type Thu Stat Sun 21 Sat Sun 22 Sat Sun 23 Sun 24 6670 Hourly Regular Rate RT 1 1 6670 Overtime RT 1 1 6949 Hourly Regular Rate RT 1 1 2754 Hourly Regular Rate RT 10.00 1	Work ID Pay Classification Pay Type Thu Pri Sat Sun Mon 2 2 2 2 3 2 4 25 6670 Hourly Regular Rate RT 12.50 6670 Overtime RT 11.50 6949 Hourly Regular Rate RT 11.50 2754 Hourly Regular Rate RT 10.00 11.00	Work ID Pay Classification Thu Type Fri Sat Sun Mon Tue Mon Tue 6670 Hourly Regular Rate RT 21 22 23 24 25 26 12.50 11.50 6670 Overtime RT 11.50 11.50 6949 Hourly Regular Rate RT 11.50 11.50 2754 Hourly Regular Rate RT 10.00 11.00 9.00	Work ID Pay Classification Type Thu Type Fri Sat Sun Mon Tue Wed	Work Pay Itype Thu Itype Fri Sat Sun Mon Tue Wed Tue Wed Hours Timesheet Hours 6670 Hourly Regular Rate RT 21 22 23 24 25 26 27 1.50 7.00 31.00 12.50 11.50 7.00 31.00 31.00 6670 Overtime RT 11.50 11.50 11.50 4.00 27.00 4.50 4.50 6949 Hourly Regular Rate RT 11.50 11.50 4.00 27.00 40.00 2754 Hourly Regular Rate RT 11.00 9.00 10.00 40.00 40.00	Work ID Pay Classification Type Thu Type Fri Sat Sun Mon Tue Wed Wed Wed Wed Wed William Timesheet Hours Hours Hours Hours Hours 6670 Hourly Regular Rate RT 12.50 11.50 7.00 31.00 31.00 6670 Overtime RT 11.50 11.50 4.50 4.50 4.50 6949 Hourly Regular Rate RT 11.50 11.50 4.00 27.00 27.00 2754 Hourly Regular Rate RT 10.00 11.00 9.00 10.00 40.00 40.00	Work Pay Thu Fri Sat Sun Mon Tue Wed Timesheet Paid Pay Rate	Work ID Pay Classification Pay Type Thu FrI Sat Sun Mon Tue Wed UD Timesheet Hours Hours Rate Pay Rate Gross Pay Rate Job Rate Gross Pay Rate 6870 Hourly Regular Rate RT 12.50 11.50 7.00 31.00 31.00 31.00 27.00 837.00 31.00 31.00 27.00 837.00 837.00 6870 Overtime RT 4.50 4.50 4.50 4.50 4.50 4.50 4.50 27.00 27.00 27.00 18.00 486.00 182.25 6949 Hourly Regular Rate RT 11.50 11.50 4.00 27.00 4.00 40.00 40.00 36.00 1,440.00 2754 Hourly Regular Rate RT 11.00 9.00 10.00 40.00 40.00 36.00 1,440.00	Work ID Pay Classification Thu Type Thu Type Sat Sun Mon Tue Wed Use Wed Timesheet Hours Hours Hours Rate Gross Pay Pay Gross Pay Rate Number Check Rate Number 6670 Hourly Regular Rate RT 12.50 11.50 7.00 31.00 31.00 31.00 27.00 837.00 0.93 Draft 31.00 27.00 837.00 0.93 Draft 0.93 Draft 6674 Hourly Regular Rate RT 11.50 11.50 4.00 27.00 27.00 18.00 486.00 0.00 Draft 0.00 Draft 2754 Hourly Regular Rate RT 11.00 9.00 10.00 40.00 40.00 36.00 1,440.00 1.09 Draft	Work ID Pay ID Thu Fri Sat Sun Mon Tue Wed Classification Timesheet Hours Rate Hours Rate Gross Pay Rate Number Gross Pay Rate Nu	Work ID Pay ID Thu Fri Sat Sun Mon Tue Wed Classification Timesheet Hours Rate Gross Pay Rate Hours Rate Gross Pay Rate Number Gross Pay Rate Number Gross Pay Security Social Social Hours Rate Gross Pay Rate Number Gross Pay Rate Number Gross Pay Security 6870 Overtime RT 4.50 4.50 4.50 4.50 4.50 4.50 4.50 4.50 4.60 12.25 1.40 Draft 1.262.25 78.26 6949 Hourly Regular Rate RT 11.50 11.50 4.00 27.00 27.00 18.00 486.00 0.00 Draft 486.00 30.13 2754 Hourly Regular Rate RT 10.00 11.00 9.00 10.00 40.00 40.00 36.00 1,440.00 1.09 Draft 2,034.00 126.11	Work ID Classification Pay Type Thu Fri Sat Sun Mon Type Tue Wed 21 Timesheet Hours Hours Hours Rate Gross Pay Rate Gross Pay Rate Number Gross Pay Security Care Gross Pay Security Care Rate Number Rate Number Gross Pay Security Care Rate Number Gross Pay Security Care Rate Number Rate Number Gross Pay Security Care Rate Number Rate Rate Number Gross Pay Security Care Rate Number Rate Rate Number Rate Rate Number Rate Rate Number Rate Rate Rate Number Rate Rate Number Rate Rate Rate Rate Rate Rate Rate Rate	Work ID Pay Type Thu Fri Sat Sun Mon Type Wed ID Timesheet Hours Hours Hours Hours Rate Gross Pay Fringe Rate Number Gross Pay Security Care Tax Federal Tax 6870 Hourly Regular Rate RT 12.50 11.50 7.00 31.00 31.00 27.00 837.00 0.93 Draft 1,262.25 78.26 18.30 157.00 157.00 6870 Overtime RT 4.50 4.50 4.50 4.50 4.50 40.50 182.25 1.40 Draft 1,262.25 78.26 18.30 157.00 157.00 6949 Hourly Regular Rate RT 11.50 11.50 4.00 27.00 27.00 18.00 486.00 0.00 Draft 486.00 30.13 7.05 21.00 2754 Hourly Regular Rate RT 11.00 9.00 10.00 40.00 40.00 36.00 1,440.00 1.09 Draft 2,034.00 126.11 29.49 272.00	Work ID Pay Type Thu Fri Sat Sun Mon Type Wed Type Timesheet Hours Hours Hours Hours Rate Gross Pay Rate Hours Hours Rate Gross Pay Rate Number Gross Pay Rate Number Gross Pay Security Care Tax Tax Tax State Tax Tax 6870 Hourly Regular Rate RT 12.50 11.50 7.00 31.00	Work ID Pay Type Thu Fri Sat Sun Mon Tue Wed Classification Thu Fri Sat Sun Mon Tue Wed Classification Pay Rate Gross Pay Rate Number Job Fringe Check Rate Number Total Social Median Security Social Median Security State Tax Other 6870 Hourly Regular Rate RT 12.50 11.50 7.00 31.00 31.00 27.00 31.00 27.00 837.00 0.93 Draft 1,262.25 78.28 18.30 157.00 157.00 67.46 50.00 6870 Overtime RT 4.50 4.50 4.50 4.50 4.50 4.50 4.50 40.50 182.25 1.40 Draft 1,262.25 78.26 18.30 157.00 67.46 50.00 667.46 50.00 6949 Hourly Regular Rate RT 11.50 11.50 4.00 27.00 27.00 18.00 486.00 0.00 Draft 486.00 30.13 7.05 21.00 5.81 0.00 2754 Hourly Regular Rate RT 11.00 9.00 10.00 40.00 40.00 36.00 1,440.00 1.09 Draft 2,034.00 126.11 29.49 272.00 116.85 0.00	ID Classification Type 21 22 23 24 25 26 27 Hours Hours Rate Gross Pay Rate Number Gross Pay Rate Number Gross Pay Security Care Tax Tax Other Deduct 6870 Hourly Regular Rate RT 12.50 11.50 7.00 31.00 31.00 27.00 837.00 0.93 Draft 1,262.25 78.26 18.30 157.00 67.48 50.00 371.02 6870 Overtime RT 4.50 4.50 4.50 4.50 182.25 1.40 Draft 1,262.25 78.26 18.30 157.00 67.48 50.00 371.02 6849 Hourly Regular Rate RT 11.50 11.50 4.00 27.00 27.00 18.00 486.00 0.00 Draft 486.00 30.13 7.05 21.00 5.81 0.00 63.99 2754 Hourly Regular Rate RT 10.00 40.00 40.00 36.00 1,440.00 1.09 Draft 2,034.00 126.11 <t< td=""></t<>

athan Sanborn , owner, do hereby state:		
	ject Edison Foard:HHI eirport; that during the payroll period commencing on Mar-21, 2024 and ending on Mar-27, 2024 all persons employed on the said projent behalf of said Quality Electrical Systems, Inc. from the full weekly wages earned by any person, other than permissible deductions as defined in Regulations 108, 72 Stat. 967; 76 Stat 357; 40 U.S.C. 276c), and described below:	
That any payrolls otherwise under this contract required to be submitted for the above period are correct an the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he	nd complete; that the wage rates for laborers and mechanics contained therein are not less than the applicable wage rates contained in any wage determination performed.	on Incorporated
That any apprentices employed in the above period are duly registered in a bona fide apprenticeship progra ncy exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Departm	am registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, of if no such ment of Labor.	recognized
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 fisted in the anoted 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 employers.	oyees, except a
(b) WHERE FRINGE BENEFITS ARE PAID IN CASH Each taborer or mechanic listed in the above referenced payroll has been paid, as indice as noted in Section 4(c) below.	ated 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 co	ontract, except
(c) EXCEPTIONS		
Exception (Craft)	Explanation	
Remarks		
Name and Title Nathan Sanborn , owner	Signature	
THE MAIL FILL FALCIFICATION OF ANY OF THE ADOME STATEMENTS MAY SUBJECT THE OF	DITRACTOR OR SUBCONTRACTOR TO CIVIL OR GRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231	
OF TITLE 31 OF THE UNITED STATES CODE.	SHINGLOL OF GENERAL IN CHIEF OF CHIRINGET WAS COLOUR OF CROUNT ION OF THE TO-NIO CENTRES OF	

Date: Apr-22, 2024

Contractor Quality Electrical Systems, Inc. Po Box 1405

Project

Edison Foard:HHI airport PO Box 19888

Charlotte, NC 28219-0888

Project/Contract # Payroll Number For Week Ending

9 4/3/2024

Beaufort, SC 29901

					н	onts M	OUKE	i by Day																
		Work	Pay	Thu	Fri	Sat	Sun	Mon Tu	e W	ed	Timesheet	Paid	Pay	Job	Fringe	Check	Total	Social	Medi-	Federal	State		Total	
Employee Name	ID	Classification	Туре	28	29	30	31	1 2	: ;	3	Hours	Hours	Rate	Gross Pay	Rate	Number	Gross Pay	Security	care	Tax	Tax	Other	Deduct	Net Pay
Daniel L. Scarborough	6670	Hourly Regular Rate	RT	12.50				13.50		and the state	26.00	26.00	27.00	702.00	1.04	Draft	1,080.00	66.96	15.66	117.00	55.79	42.99	298.40	781.60
Garry A. Brigmon	2754	Hourly Regular Rate	RT	10.00	7.00	10.00		9.00 4.0	00		40.00	40.00	36.00	1,440.00	0.99	Draft	2,304.00	142.85	33.41	332.00	134.13	-15.49	626.90	1,677.10
Garry A. Brigmon	2754	Overtime	RT					7.0	00 9.	.00	16.00	16.00	54.00	864.00	1.48	Draft	2,304.00	142.85	33.41	332.00	134.13	-15.49	626.90	1,677.10

Date: Apr-22, 2024 I, Nathan Sanborn , owner, do hereby state:			
paid the full weekly wages earned, that no rebates have	e been or will be made either directly or indirectly to or on I	oct Edison Foard HHI airport; that during the payroll period commencing on Mar-28, 2024 and ending on Apr-03, 2024 all persons employed on behalf of said Quality Electrical Systems, inc. from the full weekly wages earned by any person, other than permissible deductions as defined 108, 72 Stat. 967, 76 Stat 357, 40 U.S.C. 276c), and described below:	the said project have been in Regulations, Part 3 (29
(2) That any payrolls otherwise under this contract require the contract; that the classifications set forth thereign.	uired to be submitted for the above period are correct and in for each laborer or mechanic conform with the work he p	complete; that the wage rates for laborers and mechanics contained therein are not less than the applicable wage rates contained in any wag performed.	e determination Incorporated
(3) That any apprentices employed in the above period agency exists in a State, are registered with the Bureau	t are duly registered in a bona fide apprenticeship program u of Apprenticeship and Training, United States Departmen	n registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, and of Labor.	of if no such recognized
(4) That:			
(a) WHERE FRINGE BENEFITS ARE PAID TO AF in addition to the basic hourly we noted in Section 4(c) below.	PROVED PLANS, FUNDS, OR PROGRAMS age rates paid to each laborer or mechanic listed in the ab	bove 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, except as
(b) WHERE FRINGE BENEFITS ARE PAID IN CA: Each laborer or mechanic listed as noted in Section 4(c) below.	SH In the above referenced payroll has been paid, as indicate	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 benefits as	listed in the contract, except
(c) EXCEPTIONS			
Exception (Craft)		Explanation	
Remarks:			
Name and Title Nathan Sanborn , owner		Signature	
THE WILLFUL FALSIFICATION OF ANY O		NTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231	

Contractor Quality Electrical Systems, Inc. Po Box 1405 Beaufort, SC 29901

Project

Edison Foard:HHI airport PO Box 19888 Charlotte, NC 28219-0888

Project/Contract # Payroll Number For Week Ending

10 4/10/2024

					- ITI	Onia i	RACIK	BU DY L	ay															
		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	4	5	6	7	8	9	10	Hours	Hours	Rate	Gross Pay	Rate	Number	Gross Pay	Security	care	Tax	Tax	Other	Deduct	Net Pay
Garry A. Brigmon	2754	Hourly Regular Rate	RT	10.00				10.00	10.00	10.00	40.00	40.00	36.00	1,440.00	0.96	Draft	2,385.00	147.87	34.58	351.00	139.31	0.00	672.76	1,712.24
Garry A. Brigmon	2754	Overtime	RT	1.50	8.00	7.00		1.00		1	17.50	17.50	54.00	945.00	1.44	Draft	2,385.00	147.87	34.58	351.00	139.31	0.00	672.76	1,712.24
Joseph Holmes Jr.	9339	Hourly Regular Rate	RT					9.50	10.00		19.50	19.50	26.00	507.00	2.05	Draft	507.00	31.43	7.35	33.00	10.20	0.00	81.98	425.02
William N. Golden	8794	Hourly Regular Rate	RT	A promotion						1.00	1.00	1.00	29.00	29.00	1.12	Draft	1,160.00	71.92	16.82	93.00	60.91	0.00	242.65	917.35

Date: Apr-22, 2024 I, Nathan Sanborn , owner, do hereby state:		
(1) That I pay or supervise the payment of the persons employed by Quality Electrical Systems, Inc. on the proje- paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 1)	ct Edison Foard:HHI airport; that during the payroll period commencing on Apr-04, 2024 and ending on Apr-10, 2024 all persons employed or behalf of said Quality Electrical Systems, Inc. from the full weekly wages earned by any person, other than permissible deductions as defined 08, 72 Stat. 967; 76 Stat 357; 40 U.S.C. 276c), and described below:	n the said project have been d in Regulations, Part 3 (29
(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he payroll.	complete; that the wage rates for laborers and mechanics contained therein are not less than the applicable wage rates contained in any wa performed	ige determination Incorporated
(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	n registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labort of Labort.	r, 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 ab noted in Section 4(c) below.	ove referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benef	fit of such employees, except as
(b) WHERE FRINGE BENEFITS ARE PAID IN CASH Each laborer or mechanic listed in the above referenced payroll has been paid, as indicate as noted in Section 4(c) below.	ed 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	s listed in the contract, except
(c) EXCEPTIONS		
Exception (Craft)	Explanation	
Remarks:		
Name and Title	Signature	
Nethan Sanbom , owner	O'BLUMAN A	
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CON- OF TITLE 31 OF THE UNITED STATES CODE.	TRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSEDUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231	

Contractor Quality Electrical Systems, Inc. Po Box 1405 Beaufort, SC 29901

Project

Edison Foard:HHI airport PO Box 19888 Charlotte, NC 28219-0888 Project/Contract #
Payroll Number
For Week Ending

11

4/17/2024

								id by i															
		Work	Pay	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Timesheet				Fringe Check		Social	Medi-				Total	
Employee Name	ID	Classification	Type	11	12	13	14	15	16	17	Hours	Hours	Rate	Gross Pay	Rate Number	Gross Pay	Security	care	Tax	Tax	Other	Deduct	Net Pay
Garry A. Brigmon	2754	Hourly Regular Rate	RT	10.00				9.00	9.00	9.00	37.00	37.00	36.00	1,332.00	1.50 Draft	1,332.00	82.58	19.32	118.00	71.92	0.00	291.82	1,040.18
Joseph Holmes Jr.	9339	Hourly Regular Rate	RT	8.50				7.00		0.50	16.00	16.00	26.00	416.00	2.50 Draft	416.00	25.80	6.03	22.00	6.58	0.00	60.41	355.59

athan Sanborn , owner, do hereby state:	
That I pay or supervise the payment of the persons employed by Quality Electrical Systems, Inc. on the pro If the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or R Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat.	eject Edison Foard:HHI airport; that during the payroll period commencing on Apr-11, 2024 and ending on Apr-17, 2024 all persons employed on the said project have been on behalf of said Quality Electrical Systems, Inc. from the full weekly wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 108, 72 Stat. 967, 76 Stat 357; 40 U.S.C. 276c), and described below:
That any payrolls otherwise under this contract required to be submitted for the above period are correct at the contract; that the classifications set forth therein for each laborer or mechanic conform with the work h	nd 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 e performed.
That any apprentices employed in the above period are duly registered in a bona fide apprenticeship programcy exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department	am registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, of if no such recognized nent of Labor.
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 noted in Section 4(c) below.	above referenced payroli, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as
(b) WHERE FRINGE BENEFITS ARE PAID IN CASH Each laborer or mechanic listed in the above referenced payroll has been paid, as indic as noted in Section 4(c) below.	tated 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
(c) EXCEPTIONS	
Exception (Craft)	Explanation
Remarks:	
Name and Title	Signature
Nathan Sanborn , owner	
THE VALUE OF EAT SECULATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE C	ONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231
OF TITLE 31 OF THE UNITED STATES CODE.	200000000000000000000000000000000000000

Date: Apr-22, 2024

SOUTH CAROLINA AEI *******REQUEST FOR

REIMBURSEMENT *******	RONAUTICS COMMISSION
7	# _/

Hilton Head Island Airport
SCAC GRANT AMOUNT:\\$
S
AMOUNT PAID BY SPONSOR TO DATE: \$
AMOUNT BILLED TO STATE BY DATE: \$ 681,381.43
AMOUNT PAID BY STATE TO DATE: \$ 0.00
PAYMENT REQUESTED THIS APPLICATION: \$5,150.00
This is to certify that the required local funds, a minimum of \$5,150.00 were on hand and have been encumbered for the purpose of matching funds allocated by the SC Aeronautics Commission for this project; and no other state funds will be used to match Aeronautics funds specifically appropriated to the sponsor for this project: and that the city, county, or authority has paid \$3,042,825.92 on the above project (Include conies of all invoices charges, cancelled checks, or bank statements)
Signature & Title of County, City, or Authority Representative
This is to certify that all materials have been received and/or all work was performed as specified in the contract documents to the South Carolina Aeronautics Commission. All All All March Director
FOR AERONAUTICS USE ONLY
AUDIT BY: Chris Eversmann APPROVED FOR PAYMENT: 7/24/2024 ACCOUNT ID. NO: AMT OF GRANT \$ 12,000,000.00 TOTAL PAID \$ 507,621.92 THIS REQUEST \$ 5,150.00 AMT REMAINING \$ 11,487,228.08

Date: 07/19/2024 Airport: HILTON HEAD ISLAND AIRPORT

SCDOA NO: 23-029 Payment Request No. 5

			•							
								AIP SHARE (See		
						INVOICE	Application of	AIP Share		
			CHECK/EFT			AMOUNT (See	FAA 86.19%	Summary Below		
PAYEE	DATE PAID	EFT#	AMOUNT	INVOICE NO.	INVOICE DATE	Summary Below)	Eligibility Ratio	86.1	SCAC	FULL DESC
Previously requested										
EDISON FOARD LLC	2/29/2024	25211	\$ 824,139.65	4-2119-1905	1/30/2024	\$ 774,639.65	\$ 667,644.60	\$ 600,880.14	173,759.51	HXD TERMINAL EXPANSION PROJECT PHASE 1
EDISON FOARD LLC	3/27/2024	25974	\$ 730,986.46	5-2119-1905	2/29/2024	\$ 730,986.46	\$ 630,020.90	\$ 567,018.81	163,967.65	HXD TERMINAL EXPANSION PROJECT PHASE 1
EDISON FOARD LLC	5/2/2024	26817	\$ 861,594.81	6-2119-1905	3/30/2024	\$ 861,594.81	\$ 742,589.31	\$ 668,330.38	193,264.43	HXD TERMINAL EXPANSION PROJECT PHASE 1
EDISON FOARD LLC	5/2/2024	27730	\$ 670,455.00	7-2119-1905	4/30/2024	\$ 670,455.00	\$ 577,850.18	\$ 520,065.16	150,389.84	HXD TERMINAL EXPANSION PROJECT PHASE 1
Requested this pay request										
TERRACON	2/29/2024	25304	\$ 51,500.00	TK74914	2/21/2024	\$ 5,150.00	N/A	N/A	5,150.00	ABSESTOS SURVEY AT HXD AIRPORT TERMINAL
Total of all past and current pay requests			\$ 3.042.825.92			686,531,43				



INVOICE

Savannah, GA 912-629-4000

Project Mgr: Philip Kucera

Project: Hilton Head Island Airport Terminal Asbestos Survey

120 Beach City Road

Hilton Head Island, SC 29926

<u>.</u> Hilton Head Island Airport

Hilton Head Island, SC 29926 120 Beach City Rd

Attn: Stephen Parry

Terracon Consultants, Inc.

Invoice Number: TK74914

REMIT TO:

PO Box 959673

St Louis, MO 63195-9673

Federal E.I.N.: 42-1249917

Project Number: ES247035 2/21/2024

Invoice Date: For Period: 2/04/2024 to 2/17/2024

Description Total

Environmental Services

Additional TEM NOB Lab Fees (5 @ \$50 each)

Asbestos Survey

Subtotal \$5,150.00

\$4,900.00

\$250.00

Invoice Total \$5,150.00

Created on 2/21/2024

Client #665257

Beaufort County, Beaufort, SC 29901-1228

INVOICE DATE 02/21/2024 INVOICE NUMBER TK74914 ASBESTOS SURVEY AT HHI AIRPORT TERMINAL DESCRIPTION GL#:10001130 - 57130 \$5,150.00 INVOICE AMOUNT \$5,150.00

PAGE: 1 OF 1

EFT NUMBER: 00025304

VENDOR NUMBER
VENDOR NAME
EFT NUMBER
EFT DATE
EFT AMOUNT



Beaufort County Finance

Vendor Number

EFT Number 25304

2745

EFT Date **02/29/2024**

Post Office Drawer 1228
Beaufort, South Carolina 29901-1228
(843) 255-2290

\$5,150.00

Pay *Five Thousand One Hundred Fifty Dollars and 00 Cents*

To the TERRACON CONSULTING INC Order Of PO BOX 959673 SAINT LOUIS, MO 63195-9673

NON-NEGOTIABLE



Beaufort County Finance
Post Office Drawer 1228
Beaufort, South Carolina 29901-1228
(843) 255-2290

ADDRESS SERVICE REQUESTED

TERRACON CONSULTING INC PO BOX 959673 SAINT LOUIS, MO 63195-9673