## **Payroll Signature Authorization**

Certificate from Contractor Appointing Officer or Employee to Supervise Payment of Employees

Project Number	Project Name		
Company Name		Prime Contractor	Subcontractor
Appointed Pay Supervisor (name)			
Signature of Appointed Pay Supervisor			
Beginning Service Date			
Designated Labor Standards Offic	er (name)		

I hereby certify that as the prime contractor/ or subcontractor for the above-named activity/ role in connection with construction of the above-named Project (I) (we) have appointed the above-named individual to supervise the payment of employees and certify the payroll statement of compliance.

The appointed pay supervisor possesses full knowledge of the compliance mandates set forth in the payroll documents required by the Copeland "Anti-kickback" Act (TITLE 18, U.S.C., Sec. 874; 40 USC §3145) which he/she will execute with (my) (our) full authority and approval until such time as (I) (we) submit to the designated Labor Standards Officer a new certificate appointing some other person to supervise employee pay.

The authorized officer of a corporation or partnership must execute this certificate prior to the first payroll and submit it therewith. Any change of the appointee requires a new certificate to accompany the first payroll for which the new appointee executes a statement of compliance required by the Copeland "Anti-kickback" Act.

Company owner hereby acknowledges that signing this certification in no way signifies relinquishment of full responsibility for compliance with applicable Davis-Bacon Act (DBA) and related labor laws.

Authorized Officer Name

Title

Signature

Date