Caltrans Labor Compliance Program
Wage Case Checklist

EA Number: __________________________ District LCO: __________________________

Prime Contractor: __________________________

Subcontractor (if applicable): __________________________

Documents That Must Be Submitted With All Cases:

- Print-out of this form
- Form CEM 2506 with summary
- Form CEM 2507 (Case Summary)
- Form CEM 2508 (Source Document Audit - SDA Summary)
- Form 2509 (SDA Checklist)
- Prejob Checklist
- Sign-in Sheet
- Applicable Contract Scopes of Work (bid items)
- Contract Special Provisions (front sheet)
- Wage Determinations (state and federal, if applicable)
- Correspondence between Caltrans and contractor
- Certified Payroll Records
- Fringe Benefit Statements (if applicable)
- Trust Fund Statements (if applicable)
- Inspector Reports
- Source Document Audit / Date conducted: ________________
  - Cancelled Checks
  - Time Cards
  - Bank Statement
  - Payroll Journal
  - Form DE 9 -- Quarterly Contribution Return and Report of Wages
  - Form 941 – Employer’s Quarterly Federal Tax Return
  - Form W-2 – Wage and Tax Statement
  - Paycheck Stubs
- Employee Interviews or Statements
- Employee Complaints
- Case History of Events
- Record of Conversation
- Information from Labor Union or Labor Management Group
- Other: __________________________

Page 1 of 3
Rev 03/21/13
**Caltrans Labor Compliance Program**

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### Additional Information Needed for Specific Cases:

#### Fringe Benefit Underpayment/Non Payment

<table>
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- Has LCO contacted Trust Fund?
  - If NO, please specify: ________________________________

- Did employees receive separate compensation for FB?
  - If YES, please specify: ________________________________

- Other sources of information about failure to pay FB?
  - If YES, please specify: ________________________________

#### Certified Payrolls – Not Submitted

<table>
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<th>Yes</th>
<th>No</th>
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- Violation by prime contractor?
- Violation by subcontractor?
  - If YES, is sub still working on project?

- Employee interviews conducted?
  - If NO, please specify: ________________________________

- Independent record of hours on job (by employee, union, etc.)
  - If YES, please specify: ________________________________

- RE Report complete?
  - If NO, please explain: ________________________________

#### Employees / Hours Missing from Certified Payrolls

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- Did you obtain time cards for verification of hours and location worked?
  - If NO, please specify: ________________________________

- Has LCO interviewed employee(s)?
  - If NO, please specify: ________________________________

#### Misclassification

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- Is this a union scope of work or jurisdictional dispute?
- Did you provide the contractor with the applicable DIR scope of work?
  - If NO, please specify: ________________________________
Summary

Please provide a brief summary of the particular issues and facts, including the type of violation such as overtime, misclassification, fringe benefits, etc.