

# MONTHLY EMPLOYMENT REPORT

Contractor: \_\_\_\_\_ Employer I.D. Number: \_\_\_\_\_

Project Title: \_\_\_\_\_ Bid Number: \_\_\_\_\_

Reporting Period: From: \_\_\_\_\_ To: \_\_\_\_\_

Employee List		Last 4 Digits SSN	Employee Address	Male or Female	1 Ethnic Symbol	Craft	2 Employee Source	Number of Hours Worked
	Last Name, First Name, Middle Initial							
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								

1 Ethnic Symbol	
Black, African American	BL
Mexican American, Hispanic, Latino, Puerto Rican	MA
Native American, American Indian, Eskimo	NA
Asian, Pacific Islander	AP
Filipino	FI
Caucasian	CA
Other Ethnicity (not defined above)	OTH

2 Employee Source	
Apprenticeship Program	A
Employment Agency	E
Training Program	T
Union Hiring Hall	U
Other	O

I certify under penalty of perjury that the foregoing information is true and correct:

\_\_\_\_\_  
Authorized Signature
Print Name and Title
Date

