

Statement of Authorized Signatory Form

(For submitting electronic certified payroll records)

This form is to serve as a letter acknowledging that I, First and Last Name. will serve as the authorized signatory party for weekly certified payroll reports for the following Sandia National Laboratories contract number, PO or Contract Number (Example: 1856458)

To complete your setup in our electronic certified payroll system, please provide the following:

* How do you handle the Fringe Rate?
  + On the employees check with the Wage Rate
  + In a plan for the employee to receive the benefit at a later date (i.e. 401k or similar)
    - Enter the name of the plan(s) here.
* What day does your payroll week end on Choose the day.
* When do you expect to start working on this project? Click or tap to enter a date.
* When do you expect to be completed on this project? Click or tap to enter a date.
* Your contact information:
  + Email Address: your.name@company.com
  + Phone: (505) 555-5854

As the company official handling the certified payroll for your company, you will be required to notify, via email ([certpay@sandia.gov](mailto:certpay@sandia.gov)), Sandia National Laboratories with any changes, additions or deletions.

If you have any questions or concerns, please contact us at [certpay@sandia.gov](mailto:certpay@sandia.gov).

|  |  |  |
| --- | --- | --- |
| Company Official Authorizing this person to submit the certified payroll: | | First and Last Name. |
|  | Phone Number: | (505) 555-8458 |
|  | Date: | Click or tap to enter a date. |

Please complete this form and return to Sandia National Laboratories.

List of Subcontractors

Please provide a list of all the subcontractors that will have employees performing labor on this project. Each subcontractor will need to fill out the first page of this form to be setup for certified payroll.

Check if only the subcontractors will have employees provide labor on this project

|  |  |  |  |
| --- | --- | --- | --- |
| Company Name | Contact Name | Contact Email | Work Classification |
| Company Name | First and Last Name. | name@company.com | Choose an item. |
| Company Name | First and Last Name. | name@company.com | Choose an item. |
| Company Name | First and Last Name. | name@company.com | Choose an item. |
| Company Name | First and Last Name. | name@company.com | Choose an item. |
| Company Name | First and Last Name. | name@company.com | Choose an item. |
| Company Name | First and Last Name. | name@company.com | Choose an item. |
| Company Name | First and Last Name. | name@company.com | Choose an item. |
| Company Name | First and Last Name. | name@company.com | Choose an item. |