

# **FORCE ACCOUNT LABOR RECORD FORM INSTRUCTIONS**

## **Heading**

- A. Fill in the name of the City/Town/Village, etc. that is receiving funds from New York State.
- B. Enter the Project # that was provided on the approval letter. (Ex. 4204-0075)
- C. Enter the Project Title that was included in the approval letter.
- D. Provide the period for which reimbursement is being requested.
- E. Enter the location where the work was completed.

## **Table**

- F. Enter each employee's name and title.
- G. Enter the dates worked on the top row. Separate regular or straight pay from overtime pay and enter the hours in appropriate row.
- H. Add the hours (regular and overtime) across for the time period specified and enter amounts in the appropriate row. Make sure that you total the hours in the column (regular and overtime) and enter the amount at the bottom.
- I. Enter the appropriate hourly rate of pay used for regular and/or overtime.
- J. Multiply the total hours (Column H) by the rate (Column I) to determine the total pay (Column J). This is the total pay the worker received for the time period listed on this record. Ensure you total the column and enter the total for regular pay (RP) and the total for overtime pay (OT).
- K. Enter the paycheck/deposit number that the employee received.
- L. Regular pay (RP) = total regular pay multiplied by the fringe benefit rate. (Enter the fringe amount in the blank). This is the total for (1).  
Overtime pay (OT) = the total overtime pay multiplied by rate. (Enter the fringe amount in the blank). This is the total for (3).
- M. Sign and date the Force Account Labor form. Each record (page) must be certified by an authorized official. (*original signature, no copies*).

\* Use additional sheets if necessary.

# FORCE ACCOUNT LABOR RECORD

(A) Sub-Recipient: \_\_\_\_\_ (B) Project Number: \_\_\_\_\_ - \_\_\_\_\_  
 (C) Project Title: \_\_\_\_\_ (D) Period: \_\_\_\_\_ to \_\_\_\_\_ 20\_\_\_\_  
 (E) Location of Work: \_\_\_\_\_

(F) Employee Name and Title	(G) Date/hours worked each day							(H) Total Hours	(I) Rate Per Hour	(J) Total Pay	(K) Paycheck #
	Date										
1.	Reg										
	O/T										
2.	Reg										
	O/T										
3.	Reg										
	O/T										
4.	Reg										
	O/T										
5.	Reg										
	O/T										
(L) Reg Pay _____ x Fringe Benefit Rate _____ = _____ (1)									Total RP \$		(2)
OT Pay _____ x Fringe Benefit Rate _____ = _____ (3)									Total OT \$		(4)
(1) + (2) + (3) + (4) = \$ _____ Grand Total (this page)											

*I certify that the above information was transcribed from daily logs, vendor invoices, stock cards, or other documents which are available for audit.*

(M) Certified by: \_\_\_\_\_ Title: \_\_\_\_\_  
 Print Name: \_\_\_\_\_ Date: \_\_\_\_\_