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June 18, 2014
Via Regular Mail

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BRYAN J. BERRY
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LEONARD P. DIORIO
RICHARD F. PELLEGRINO
DONALD J. STORINO II

OF COUNSEL

IN REPLY REFER TO FILE NO.

Mr. John J. Higgins
739 S. 25th Avenue
Bellwood, Illinois 60104

EP-1

Re: Freedom of Information Act Request

Dear Mr. Higgins:

The Village of Elmwood Park is in receipt of your June 11, 2014 Illinois Freedom of Information Act (5 ICLS 140/1 *et seq.*) ("FOIA") request for the following records:

ALL PAYROLL RECORDS FOR DYNAMIC CONST. DOING CONCRETE
WORK FOR THE VILLAGE.

Enclosed are records responsive to your request. However, please be advised that certain information in the records being provided has been determined to be exempt from disclosure under FOIA, and that information has been redacted from the records being provided.

Section 7(1)(b) of FOIA provides that "private information" is exempt from disclosure. "Private information" is defined in FOIA as, "unique identifiers, including a person's social security number, driver's license number, employee identification number, biometric identifiers, personal financial information, passwords or other access codes, medical records, home or personal telephone numbers, and personal email addresses. Private information also includes home address and personal license plates, except as otherwise provided by law or when compiled without possibility of attribution to any person." 5 ILCS 140/2(c-5). Consequently, certain unique identifiers, including social security numbers, home addresses, and signatures, have been redacted from the records being provided.

The person responsible for the decision to deny a portion of your request is the Village of Elmwood Park Freedom of Information Officer, Gina Pesko. In accordance with Section 9(a) of FOIA, you are hereby notified that you have the right to file a Request for Review regarding the decision made by the Village of Elmwood Park Freedom of Information Officer with the Public

STORINO, RAMELLO & DURKIN

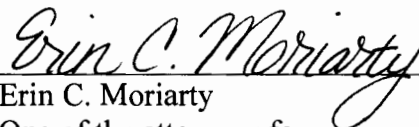
Mr. John J. Higgins
June 18, 2014
Page 2

Access Counselor at the Illinois Attorney General's Office. You can file your Request for Review with the Public Access Counselor by writing to:

Sarah Pratt, Acting Public Access Counselor
Office of the Attorney General
500 South 2nd Street
Springfield, Illinois 62706
Fax: 217-782-1396
E-mail: publicaccess@atg.state.il.us

Also, you are notified that you have the right to judicial review regarding the decision made by the Village of Elmwood Park Freedom of Information Officer pursuant to Section 11 of FOIA.

Sincerely,


Erin C. Moriarty
One of the attorneys for
the Village of Elmwood Park

Enclosures



**Illinois Department
of Transportation**

**Equal Employment Opportunity
Workforce Analysis**

Report for Month Ending: May 2014

Check Appropriate Block

- Contractor
- Subcontractor

Name: DYNAMICX ENTERPRISES INC.
 Address: 4751 S. CENTRAL AVENUE, STICKNEY, IL 60638
 Route: _____
 Section: _____
 County: Cook
 Contract No.: _____

Project: Village of Elmwood Park 2014
 Contract Value: \$827,041.00
 Percent Complete: 0.00%
 Date Work Started: May 29, 2014

Number of Employees																						
Table A																						
Job Categories	Employees		Total Minorities		African		Asian		Indian /		Latino		Hawaiian		Races		White		Apprentices		Trainees	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Officials (Managers)																						
Supervisors																						
Foremen																						
Clerical																						
Equipment Operators																						
Mechanics																						
Truck Drivers																						
Ironworkers																						
Carpenters																						
Cement Masons																						
Electricians																						
Pipefitters, Plumbers																						
Painters																						
Laborers	4	0	4	0							4	0										
Total	4	0	4	0	0	0	0	0	0	0	4	0	0	0	0	0	0	0	0	0	0	

Note: See instructions on last page

Table B											
Apprentices	0	0	0	0							
On-the-Job Trainees	0	0	0	0							

Summarize new hires for the current month indicating minorities and non-minorities by job categories; use reverse side of form if needed.

Prepared by: (Signature and Title of Contractor's Representative) _____ Felipe Gonzalez - Office Assistant Date: Thursday, June 05, 2014
 Reviewed by: (Signature and Title of State Representative) _____ Date: _____

Hours of Employment

Table A

Job Categories	Employees		Total Minorities		African		Asian		Indian /		Latino		Hawaiian		Races		White		Apprentices		Trainees	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Officials (Managers)																						
Supervisors																						
Foremen																						
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Truck Drivers																						
Ironworkers																						
Carpenters																						
Cement Masons																						
Electricians																						
Pipefitters, Plumbers																						
Painters																						
Laborers	64.00	0.00	64.00	0.00							64.00	0.00										
Total	64.00	0.00	64.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	64.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Table B

Apprentices	0.00	0.00	0.00	0.00																		
On-the-Job Trainees	0.00	0.00	0.00	0.00																		

Remarks:

Employment data is to be submitted every month on this form to indicate: (1) the number of hours worked on the project (Hours of Employment); (2) the number of individuals working on a project during the reporting period (Number of Employees). This report must be submitted to the Illinois Department of Transportation by each contractor and subcontractor each month. The prime contractor is responsible for securing and submitting with his/her report, reports from all subcontractors.

The figures to be reported should represent a contractor's project workforce on board in whole or in part for an entire month.

The figures to be reported in Table A should include journeymen, apprentices and on-the-job trainees.

Figures to be reported in Table B should only include apprentices and on-the-job trainees as indicated.

The Illinois Department of Transportation is requesting disclosure of information necessary to accomplish the statutory purpose as outlined under FHPM 6-4-1(2). Title U.S.C. 23. Disclosure of this information is REQUIRED.

Failure to comply may result in the withholding of payments to the Contractor, termination or suspension of the contract in whole or in part.



Illinois Department of Transportation

Equal Employment Opportunity Workforce Analysis

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	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Officials (Managers)																						
Supervisors																						
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Pipefitters, Plumbers																						
Painters																						
Laborers	4	0	4	0							4	0										
Total	4	0	4	0	0	0	0	0	0	0	4	0	0	0	0	0	0	0	0	0	0	

Note: See instructions on last page

Table B																						
Apprentices	0	0	0	0																		
On-the-Job Trainees	0	0	0	0																		

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	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Officials (Managers)																						
Supervisors																						
Foremen																						
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Painters																						
Laborers	64.00	0.00	64.00	0.00							64.00	0.00										
Total	64.00	0.00	64.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	64.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Table B

Apprentices	0.00	0.00	0.00	0.00																		
On-the-Job Trainees	0.00	0.00	0.00	0.00																		

Remarks:

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	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Officials (Managers)																						
Supervisors																						
Foremen																						
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Ironworkers																						
Carpenters																						
Cement Masons																						
Electricians																						
Pipefitters, Plumbers																						
Painters																						
Laborers	4	0	4	0							4	0										
Total	4	0	4	0	0	0	0	0	0	0	4	0	0	0	0	0	0	0	0	0	0	0

Note: See instructions on last page

Table B																						
Apprentices	0	0	0	0																		
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Table A

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Officials (Managers)																						
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Table B

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US Department of Labor
 Employment Standards Administration
 Wage and Hour Division

For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

WEEK ENDING

May 31, 2014

PAID DATE:

June 4, 2014

Dynamicx Enterprises, Inc.													Address: 4751 SOUTH CENTRAL AVE., STE 1 E. CHICAGO, IL 60638.														
Payroll No.	Week Ending: May 31, 2014						S	M	T	W	TH	F	S	Village of Elmwood Park					1425								
Name, Address, Social Security Number of Employee	Hire (1)	Sec. 3 (2)	Income (3)	Address (4)	Gender (5)	Ethnic (6)	Work Classification	OT. OR ST.	May 25, 2014	May 26, 2014	May 27, 2014	May 28, 2014	May 29, 2014	May 30, 2014	May 31, 2014	Total Hours	Rate of Pay	Gross Amount Earned	Withholding Tax	Fica	State	Union Dues	Child Support	Savings Funds	Total Deductions	Net Wages Paid for Week	
Jose Ledezma					M	D	Laborer						8	8		16.00	44.30	\$708.80	\$32.00	\$54.22	\$29.38	\$23.04	\$0.00	\$0.00	\$138.64	\$570.16	
																0.00	66.45										
Pedro Diaz					M	D	Laborer						8	8		16.00	37.00	\$592.00	\$13.00	\$45.28	\$21.52	\$19.24	\$0.00	\$0.00	\$99.04	\$492.96	
																0.00	55.50										
Ramon Cervantez					M	D	Laborer						8	8		16.00	37.00	\$592.00	\$62.00	\$45.30	\$27.58	\$19.24	\$0.00	\$0.00	\$154.12	\$437.88	
																0.00	55.50										
Ramon Flores					M	D	Laborer						8	8		16.00	37.00	\$592.00	\$13.00	\$45.28	\$21.52	\$19.24	\$0.00	\$0.00	\$99.04	\$492.96	
																0.00	55.50										
TOTAL HOURS									0	0	0	32	32	0													

- (1) Date of Hire
- (2) Identified Sec. 3 Resident
- (3) Income Documentation Attached for New Hire

Total Hours (Combined) This Page: 64.00
 Total Hours (Combined) Chicago Residents: 48.00
 Total Hours (Combined) Non-Residents: 16.00
 Total Gross Amount Earned: \$2,484.80

Gender Codes:
 M = Male
 F = Female

Ethnic Codes:
 A. White American
 B. Black American
 C. Native American
 D. Hispanic American

Hours of Employment
 Laborers 64.00
 Operators 0.00
 Finishers 0.00
 Foremen 0.00

Date Wednesday, June 04, 2014

Felipe Gonzalez, Office Assistant
Title

I do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Dynamicx Enterprises, Inc.

(Contractor or Subcontractor)

Johnson Paving; that during the payroll period commencing on the

(Building or Work)

May 25, 2014 and ending May 31, 2014

All persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Dynamicx Enterprises, Inc. from the full
(Contractor or Subcontractor)

Weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than the permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A) issued by the Secretary of Labor under the Copeland act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276C), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laboreres or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the clasifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and training, United States Department of Labor, of if no such recognized agency exist in a State, are registered with the Bureau of Apprenticeship and trainig, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

Each laborer or mechanic listed in the above referenced payroll has been paid as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefit as listed in the contract, except as toed in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)		EXPLANATION

REMARKS:

NAME AND TITLE	DATE
 Felipe Gonzalez / Office Assistant	June 4, 2014

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

US Department of Labor

Employment Standards Administration
Wage and Hour Division

For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

WEEK ENDING

PAID DATE:

May 31, 2014

June 4, 2014

Dynamicx Enterprises, Inc.											Address: 4751 SOUTH CENTRAL AVE., STE 1 E. CHICAGO, IL 60638.															
Payroll No.	Week Ending: May 31, 2014										Village of Elmwood Park							1425								
Name, Address, Social Security Number of Employee	Hire (1)	Sec. 3 (2)	Income (3)	Address (4)	Gender (5)	Ethnic (6)	Work Classification	OT. OR ST.	May 25, 2014	May 26, 2014	May 27, 2014	May 28, 2014	May 29, 2014	May 30, 2014	May 31, 2014	Total Hours	Rate of Pay	Gross Amount Earned	Withholding Tax	Fica	State	Union Dues	Child Support	Savings Funds	Total Deductions	Net Wages Paid for Week
									S	M	T	W	TH	F	S											
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TOTAL HOURS

0 0 0 32 32 0

- (1) Date of Hire
- (2) Identified Sec. 3 Resident
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Total Hours (Combined) This Page: 64.00
 Total Hours (Combined) Chicago Residents: 48.00
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 Operators 0.00
 Finishers 0.00
 Foremen 0.00
 64.00

Date Wednesday, June 04, 2014

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May 25, 2014 and ending May 31, 2014

All persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Dynamicx Enterprises, Inc. from the full
(Contractor or Subcontractor)

Weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other the permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A) issued by the Secretary of Labor under the Copeland act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276C), and described below.

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REMARKS:

NAME AND TITLE	DATE
 Felipe Gonzalez / Office Assistant	June 4, 2014

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Payroll No.	Week Ending: May 31, 2014						S	M	T	W	TH	F	S	Village of Elmwood Park					1425								
Name, Address, Social Security Number of Employee	Hire (1)	Sec. 3 (2)	Income (3)	Address (4)	Gender (5)	Ethnic (6)	Work Classification	OT. OR ST.	May 25, 2014	May 26, 2014	May 27, 2014	May 28, 2014	May 29, 2014	May 30, 2014	May 31, 2014	Total Hours	Rate of Pay	Gross Amount Earned	Withholding Tax	Fica	State	Union Dues	Child Support	Savings Funds	Total Deductions	Net Wages Paid for Week	
Jose Ledezma [Redacted]					M	D	Laborer						8	8		16.00	44.30	\$708.80	\$32.00	\$54.22	\$29.38	\$23.04	\$0.00	\$0.00	\$138.64	\$570.16	
Pedro Diaz [Redacted]					M	D	Laborer						8	8		16.00	37.00	\$592.00	\$13.00	\$45.28	\$21.52	\$19.24	\$0.00	\$0.00	\$99.04	\$492.96	
Ramon Cervantez [Redacted]					M	D	Laborer						8	8		16.00	37.00	\$592.00	\$62.00	\$45.30	\$27.58	\$19.24	\$0.00	\$0.00	\$154.12	\$437.88	
Ramon Flores [Redacted]					M	D	Laborer						8	8		16.00	37.00	\$592.00	\$13.00	\$45.28	\$21.52	\$19.24	\$0.00	\$0.00	\$99.04	\$492.96	
TOTAL HOURS									0	0	0	32	32	0													

(1) Date of Hire	Total Hours (Combined) This Page:	64.00	Gender Codes:	Ethnic Codes:		Laborers	64.00
(2) Identified Sec. 3 Resident	Total Hours (Combined) Chicago Residents	48.00	M = Male	A. White American	B. Black American	Operators	0.00
(3) Income Documentation Attached for New Hire	Total Hours (Combined) Non-Residents	16.00	F = Female	C. Native American	D. Hispanic American	Finishers	0.00
	Total Gross Amount Earned	\$2,484.80				Foremen	0.00
							64.00

Date Wednesday, June 04, 2014

Felipe Gonzalez, Office Assistant
Title

I do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Dynamicx Enterprises, Inc.
(Contractor or Subcontractor)
Johnson Paving; that during the payroll period commencing on the
(Building or Work)
May 25, 2014 and ending May 31, 2014

All persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Dynamicx Enterprises, Inc. from the full
(Contractor or Subcontractor)

Weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other the permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A) issued by the Secretary of Labor under the Copeland act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276C), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laboreres or mechanics contained therein are not less than the applicable wage rates contained in anywage determination incorporated into the contract; that the clasifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and training, United States Department of Labor, of if no such recognized agency exist in a State, are registered with the Bureau of Apprenticeship and trainig, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

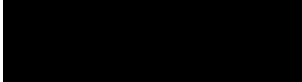
(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

Each laborer or mechanic listed in the above referenced payroll has been paid as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefit as listed in the contract, except as toed in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)		EXPLANATION

REMARKS:

NAME AND TITLE	DATE
 Felipe Gonzalez / Office Assistant	June 4, 2014

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.