



FORM PROVIDING EMPLOYEES INFORMATION REGARDING THEIR EMPLOYER AND PAY AS REQUIRED BY § 70-306(b) OF PINELLAS COUNTY'S WAGE THEFT/RECOVERY ORDINANCE

Pursuant to §70-306(b) of the Pinellas County Codes relating to Wage Theft/Recovery, employees are entitled to receive from their employer written confirmation of certain information relating to their employment. The minimal information employees must receive in writing is as follows:

1) Information about your rate of pay/remuneration/pay date:

I am to be paid \$ _____ per _____ Hour _____ Week _____ Bi-Weekly
_____ Monthly _____ Other (explain: _____)

Overtime or Commissions, if any, will be calculated and paid as follows: _____

The day/date on which you will receive your pay will be: _____

2) Allowances constituting a portion or part of your minimum rate of pay/remuneration, such as meals, lodging, or other, are as follows:

Meals: \$ _____ per _____;

Lodging: \$ _____ per _____;

Other (s): \$ _____ per _____;

\$ _____ per _____;

3) The name of your employer, including any "doing business as" name, is as follows:

4) The address of your employer's principal place of business is:

5) If different than the principal place of business, your employer's mailing address is:

6) Your employer's Telephone number(s) is/are:

Copy of above information provided to _____ (employee's name) on
_____ (date). Signed by Employee _____