

E-mail: prevailingwage@dllr.state.md.us

## ADDITIONAL SHEET FOR EMPLOYEE INFORMATION

Employee's Name:	Date of Hire:
Weekly Work Hours:	Employee Pay Rate per hour: \$
What was the hourly rate prior to the application of the Living Wage Law?: \$	
Employee's Name:	Date of Hire:
Weekly Work Hours:	Employee Pay Rate per hour: \$
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