

**CITY OF PHOENIX STREET TRANSPORTATION DEPARTMENT**

**RESTITUTION CONFIRMATION**

Contractor \_\_\_\_\_ Project No \_\_\_\_\_

Project Name \_\_\_\_\_

Employee Name \_\_\_\_\_ ID No \_\_\_\_\_

Address \_\_\_\_\_ Telephone No \_\_\_\_\_

**BACK WAGE PAYMENT INFORMATION**

Employee Job Title \_\_\_\_\_

Required Hourly Wage Rate (Base + FB) \_\_\_\_\_

Hourly Wage Rate Paid (Base + FB) \_\_\_\_\_

Gross Amount \$ \_\_\_\_\_ Net Amount \$ \_\_\_\_\_

Deductions (if any)\$ \_\_\_\_\_ Check No \_\_\_\_\_

Regular Hrs Corrected \_\_\_\_\_ OT Hrs Corrected \_\_\_\_\_

Date (s) of infraction \_\_\_\_\_

Reason for restitution: (e.g. misclassified, incorrect rate, overtime not paid, etc.) \_\_\_\_\_

**Please check one of the following:**

This payment represents net wages after taxes were deducted. I have received a breakdown showing my tax deductions.

This payment represents gross wages and I understand that I am responsible for my own taxes on the amount.

I confirm the information on this form is true and correct. I have received restitution in the amount stated and understand the payment of restitution owed me is for labor services I performed on this project during the dates stated.

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

Corporate Official Signature \_\_\_\_\_ Date \_\_\_\_\_

**Send the original to Labor Compliance Street Department**

**For Labor Compliance Use Only**

**DBRA**

**CWHSSA**

**EXHIBIT F**