

Patrick K. Ryan
Ulster County Executive



Edward M. Jordan
Director of Purchasing

**ULSTER COUNTY PURCHASING DEPARTMENT
COVERED EMPLOYEE COMPLAINT FORM**

Living Wage Act - Local Law Number 6 of 2021

COMPLAINANT INFORMATION

Name:

Phone:

Address:

EMPLOYMENT INFORMATION

Covered Employer:

Job Title:

Immediate Supervisor Name:

Immediate Supervisor Title:

Employer Address:

Employer Phone:

**Worksite Address
if different than
above:**

NATURE OF COMPLAINT

ATTACH OTHER SHEETS & DOCUMENTS AS NEEDED

Signature of Complainant

Date:

Forward to:
Ulster County Purchasing Department
Living Wage Law Compliance
P.O. Box 1800
Kingston, NY 12401-1800

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