

MINOR LABOR LAW COMPLAINT

Reason for filing the complaint: <input type="checkbox"/> Hazardous occupations <input type="checkbox"/> Breaks <input type="checkbox"/> Restricted hours <input type="checkbox"/> Work permits/wage agreements <input type="checkbox"/> Wages paid	DO NOT WRITE IN THIS AREA						
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Case #</td> <td style="width: 50%;">Approval</td> </tr> <tr> <td>County</td> <td>Investigator</td> </tr> <tr> <td colspan="2">Comments:</td> </tr> </table>	Case #	Approval	County	Investigator	Comments:	
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Comments:							

ESTABLISHMENT / EMPLOYER INFORMATION				
Name			Address	
City	State	Zip	County	Telephone
Type of Business			Number of Employees	
Is the business still operating?			Has the business filed for bankruptcy?	

MINOR EMPLOYEE INFORMATION				
Name			Address	
City	State	Zip	County	Telephone
SSN	Date of Birth	Do you have a work permit?	Do you have a wage agreement?	
Are you in a Career Based Intervention Program?	Have you graduated from high school?		Are you a parent or head of household?	
Did the employer keep time records?			Did the employer keep wage records?	
Did you keep your own time records?			What was your hourly rate of pay?	
ADDITIONAL COMMENTS:				

COMPLAINANT INFORMATION (if different than minor)				
Name			Address	
City	State	Zip	Telephone	
RELATIONSHIP TO MINOR				

SIGNATURE & NOTARY Affiant is further informed that Section 2921.13 of the Ohio Revised Code provides a penalty of a misdemeanor of the first degree and that prosecution will be pursued of those persons who “knowingly swear or affirm the truth of a false statement when...the statement is sworn or affirmed before a notary public...” Sworn to before me and subscribed by the said: <hr style="border: 1px solid black;"/> In my presence this _____ day of _____ 20____ _____ Notary Public	Complaints will be returned if not complete, signed & notarized. I hereby certify that this is a true statement to the best of my knowledge and belief. <hr style="border: 1px solid black;"/> Signature _____ date _____ <hr style="border: 1px solid black;"/> Return to: Ohio Department of Commerce Division of Industrial Compliance & Labor Bureau of Labor & Worker Safety 6606 Tussing Road Reynoldsburg, OH 43068
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