City of Alexandria

Annual Living Wage Compliance Report

Period: 20) to	20 Date:_	
RFP or Bid Number:		Contract Number:	
Authorized Signature*:		Printed Name:	
Company Name:			
Company Address:			
Contact Number: ()			
This Report** must be sub: Wage affects all service cont solicited. All personnel or re City of Alexandria occupied If, you did not perform any portion of this form and che Calendar year in question." In order to comply with the CACTIVE contracts*** Machine Purchasing Division, 100 procurement@alexandri	racts on City projects, estima epresentatives working on Cit property, regardless of hourly work under your Contract eck this box [] stipulating Check this box [] stipulating City's Living Wage Ordinance IUST submit a completed North Pitt St., Suite 301	ted to be greater than \$50,000 ty projects located on City of y wage rate, except construct the during the Calendar year, ag "No work performed on Calendar "Contract less than \$50 to the and maintain your Contract I form and return to the Calendar Alexa to the Calendar Square, Alexa to the Calendar Square to the C	O in value that is formally Alexandria owned property or ion projects, shall be listed. please complete the top City property during the 10,000 in value." ALL Contractors with City of Alexandria,
procurement@alexandri	ava.gov of fax 703, 636.0	493.	
EMPLOYEE NAME	TOTAL HOURS ON CITY PROJECT	HOURLY WAGE	TOTAL WAGES FOR CALENDER YEAR
	<u> </u>		+

Total Employee Wages paid during Calendar Year: _____

^{*} Signing this form certifies that the information is current, accurate, and complete. (This form may be reproduced.)

^{**} The City reserves the right to audit and inspect reports and payroll records, as necessary.

^{***}With the exception of construction projects.