
PLAINTIFF CONSENT FORM

I hereby consent to make a claim against Duluth Trading Company, LLC for unpaid minimum and overtime wage pay. During the past three years, there were weeks that I worked as a customer sales representative for Duluth Trading Company, LLC during which I was not paid overtime wages for the hours that I worked over 40 a week, there were also weeks during which I worked hours for which I was not compensated at least the minimum wage.

Signature and Date

Print Name

Address

City, State, Zip Code

Home Telephone

Mobile Telephone

E-Mail Address

Emergency Contact (and phone number)