



New York State Department of Labor
Division of Labor Standards

**Notice and Acknowledgement of Pay Rate and Payday
Under Section 195.1 of the New York State Labor Law**

Pay Notice for Hourly Rate Employees

Employer	Employee
Company name: _____	Name: _____
FEIN (optional): _____	Street address (include apartment): _____
Street address: _____	_____
City and state: _____	_____
Zip code: _____	City: _____
Phone: (_____) _____ - _____	State and zip code: _____
Preparer's name: _____	Phone: (_____) _____ - _____
Preparer's title: _____	
Your rate of pay: _____ per hour.	
Your overtime rate of pay: _____ per hour.	
Designated pay day: _____	

_____ Date

_____ Preparer's signature

General Statement Regarding Overtime Pay in New York State

Most employees in New York State must be paid overtime wages of 1½ times their regular rate of pay for all hours worked over 40 hours per workweek. A very limited number of specific categories of employees must be paid overtime at a lower rate or not at all.

I have been notified of my pay rate, overtime rate, and designated pay day on the date given below.

_____ Date

_____ Employee's signature

The employee must receive a duplicate signed copy of this form. The original must be kept by the employer.