

Employee/Attendant Hourly Rate

I, _____, the Employer/Consumer for my
Employee/Attendant _____, choose to pay
my Employee at the designated regular hourly rate as I have set forth below.

I understand I can pay my Employee an hourly rate within the range of \$12.00 to \$15.00
and choose to pay my Employee \$_____.

Employer/Consumer Signature

Date