
**SPAR
PLAINTIFF CONSENT FORM**

1. I consent to make a claim under the Fair Labor Standards Act, 29 U.S.C. § 201, et seq. against Spar Business Services Inc. and its owner(s) (hereinafter “Defendants”) to recover overtime pay.
2. During the past three years, there were occasions when I worked over 40 hours per week as a merchandiser or other similar position, for Defendants, and did not receive proper compensation for all of my overtime hours worked.
3. If this case does not proceed collectively, then I also consent to join any subsequent action to assert my wage and hour claims.
4. I understand that I may withdraw my consent to proceed with my claims at any time by notifying the attorneys handling the matter.

Date: _____

Signature

Print Name

Information Below Will Be Redacted in Filings with the Court. Please Print or Type.

Address: _____

City, State Zip: _____

Best Phone Number(s): _____

Email: _____

**Return this form by
fax, email or mail to:**

**Nichols Kaster, PLLP, Attn: Rachhana T. Srey
Fax: (612) 215-6870
Email: srey@nka.com
Address: 4600 IDS Center, 80 S. 8th Street, Minneapolis, MN 55402
Web: www.nka.com**