

**DEPARTMENT OF TRANSPORTATION**  
DIVISION OF CONSTRUCTION-LABOR COMPLIANCE  
DISTRICT XX  
ADDRESS  
CITY, STATE ZIP  
PHONE XXX-XXX-XXXX  
FAX XXX-XXX-XXXX  
TTY 711  
districtX.payrolls@dot.ca.gov



*Flex your power!  
Be energy efficient!*

## NOTICE OF COMPLAINT FILED

[Date]

[Prime Contractor's Name]  
[Address]  
[City, ST ZIP]

Dear [Prime Contractor's Name]:

The Labor Compliance Program for the Department of Transportation (Caltrans) received a complaint against subcontractor, [Subcontractor's Name] concerning payment of prevailing wages on contract number(s) [Contract #(s)]. The Labor Compliance Program will conduct an investigation of the complaint and contact you if further information is required.

If you have questions, please contact [Labor Compliance Officer's Name] at [phone number].

Sincerely,

[NAME IN ALL CAPS]  
(District # or Region Labor Compliance Manager or Officer)

c: [Name, Title, Office]  
*(These names appear on the original letter and all copies of the original letter. Anyone mentioned in the body of the letter should be listed in the copies.)*