LABOR CONDITION APPLICATION WORKSHEET
(to be completed by Employer's Representative)

Part A: Information about the employer

1. Legal Name*: [redacted]

   (Please make sure that your legal name precisely matches the name you used while obtaining your Federal Tax ID Number or your Tax Returns. As an example, if your company name is *Acme Rockets* but it was entered as *Acme Rockets, Inc.* please enter the name as the latter. Please also do not omit any punctuation marks such as commas or periods. Failure to do so may cause serious delays with the US DOL's new LCA system)

2. Federal Tax ID Number: [redacted]

3. Telephone number: [redacted] Fax number: ( ) -
   Email address: [redacted]

4. Physical Address (not PO Box):
301 E. 66th St. 14G
New York, NY 10065

5. Physical Address where the personnel files are kept, if different: same as above

6. Name and title of person who will sign all paperwork: [redacted]/Owner

7. Title of the position for which the foreign employee will be hired: Office Manager

8. Brief description of the position and the minimum entry requirements: This position requires a bachelors degree with a background in business management and experience working with interior designers

9. Proposed salary: $35,000/year

10. Full-Time or Part-Time:
    Full-Time
11. Current total number of employees (full and part-time): 0

    Total no. of US Citizen and Permanent Resident Employees (full time only): 0

    Total number of H-1B Employees (full and/or part-time): 0

12. Brief description of your business, generally and particularly as it relates to this position:

I have an interior design business by myself. I require someone to help manage my office and business relations in order to allow me to expand my company and take on more clients.

13. Company's annual gross income: * annual net income: *

14. Date the Company was established: Oct.4, 2010

*PLEASE PROVIDE FINANCIAL RECORDS TO SUBSTANTIATE GROSS & NET ANNUAL INCOME.

15. Have you in the last 5 years been found to have committed a willful violation or material misrepresentation regarding H-1B workers?
NO

Special Section Regarding H-1B Dependent Employers (see attached memo)

16. Have you laid off or fired any workers in the last 90 days who worked in similar positions to the worker in this petition? NO If yes, explain:
17. Do you plan to lay off or fire any workers within the next 90 days who work in similar positions to the worker in this petition? NO If yes, explain:

Please note that if you are found to be an H-1B dependent employer (see attached memo), you will have to attest that you have not and will not displace US workers 90 days prior and subsequent to this petition. This attestation extends to situations where you contract labor to a second employer – i.e. that employer may not displace US workers either.

I attest the Labor Condition Application worksheet is true and correct.

_____
Signature

_____
Name and Title

_____
Date

In addition, please provide copies of the following supporting evidence:

1. **Copy of your formal (generic) job description;**
2. **Printed material/brochures available on the company history; and**
3. **Company's financial records (e.g. recent tax return or financial statements) as supporting evidence of company's financial ability to pay H-1B employee's salary. Figures should correspond to gross income/sales figure(s) provided above on this LCA worksheet.**