EMPLOYER COMPLAINT FOR UNPAID WAGES

NAME OF EMPLOYER	*	IN THE		
V.		*	CIRCUIT COURT	
NAME OF EMPLOYEE		*	FOR	
		*		
		*	Case No.:	

EMPLOYER COMPLAINT TO DISPUTE LIEN FOR UNPAID WAGES

Pursuant to §3-1103 of the La	oor and Employment Article,	
	hereby files thi	is complaint to dispute the Lien for Unpaid
Wages claimed by		
In support thereof,	states as t	follows:
1. On	(insert date), the above-named	l employee served a Notice of Intent to Claim
Lien for Unpaid Wages. A copy of	he Notice is attached hereto as Exhib	pit 1.
2. The wages claimed by the e	mployee are not due and owing to the	e employee because:
statement of all reasons why wages a hereto as Exhibit 2.	are not owed). Affidavits and docume	ents in support of this are attached
CERTIFICATE OF SERVI	CE	
I hereby certify that on this	day of	, a copy of the foregoing

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Complaint was served on	by		(state	
method of service).				

Department of Labor, Licensing and Regulation Division of Labor and Industry Employment Standards Service 1100 North Eutaw Street, Room 607 Baltimore, MD 21201 Telephone Number: (410) 767-2357 • Fax Number: (410) 333-7303 E-mail: dldliemploymentstandards-dllr@maryland.gov

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