

City of Los Angeles
ASSISTED ACTIVITY JOB INFORMATION REPORT

Business Name:	Report Capture Date:
Business Address:	Prepared By: Print Name/Title:

Instructions:

1. Please complete for all existing employment positions. The first two lines are provided as examples only.
2. Hours: Indicate the number of hours worked each week.
3. Attach additional sheets as needed.

	NAME	TITLE	HOURS PER WEEK
	Jane Doe	Exec. Assistant	40
	VACANT	Sales Clerk	26
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I understand that the information given in this Assisted Activity Job Information Report is subject to verification by government officials for the purpose of documenting job creation or retention activities. The information provided is true and correct to the best of my knowledge.

Signature of Business Owner or their Designee

Date