# Sample wage claim letter (terminated)

[Date]

[Name of employer]
[Address of employer]
[City, state, ZIP of employer]

Re: Demand for final payment of wages

Dear [employer name]:

This is a demand for my final wages. My last day of work was [last day of work]. I have worked and not been paid for [number of hours] hours and I am owed [dollar-amount owed] at this time.

Under Minnesota Statutes § 181.13, I am entitled to receive all of my final wages within 24 hours of this demand. Please mail my final wages to the address listed below within 24 hours of your receipt of this letter.

Failure to provide final wages within 24 hours of this demand may result in a penalty of up to 15 days of additional wages.

Sincerely,

[Signature of employee]

[Name of employee]
[Address of employee]