ATTACHMENT 1
SAMPLE EMPLOYEE COMPENSATION PLAN

LOCATION: _____.

LABOR CATEGORY: _____.

Base + 4 Options	**Base Period**	**1st Option**	**2nd Option**	**3rd Option**	**4th Option**
Direct Pay Rate	$_____	$_____	$_____	$_____	$_____

Base Direct Pay Rate by Specialty**:** 1,912 X _____ = **$** _____
(Hours) X (base rate) = (annual total base labor)