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## Report of Compliance with a Remedy Order

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Case:

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1. Employee's Name:

2. Employer

– Name of Business:

– Location:

– Name of Representative: (Resident registration number: )

3. Deadline for Compliance with a Remedy Order:

I complied with the Remedy Order as follows as of \_\_\_\_\_,  
regarding the application for remedy above.

Details of Remedy Order	Details for Compliance

※ Additional papers are acceptable to describe the details for more than one case.

yyyy. mm. dd.

Name:

(Signature)

To the Chair of the ○○ Labor Relations Commission

Attach ment	Evidentiary materials can be attached to verify the Compliance of Remedy Order.
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