



IMPERIAL CAREGIVER, 1200 Morris Turnpike Ste 3005, Short Hills, NJ 07078

## Imperial Caregivers LLC.

Morris Turnpike Ste 3005

Short Hills, NJ 07078

PHONE (TOLL FREE): (800) 506-7882

FAX (TOLL FREE): (908) 679-5276

Where our clients are treated like Royalty.

Today's Date: \_\_\_\_\_

### OFFER AND ACCEPTANCE LETTER.

Congratulation (Employee Name): \_\_\_\_\_

You have just been assigned a case to work with (Patient / Facility Name): \_\_\_\_\_

At (Patient's / Facility Address): Facilities / Home \_\_\_\_\_

Pay Rate: CNA \$15/hour (Facilities) and CHHA \$13/hour

Note: Live-in rates per day varies per case. And in some cases, Chha's rate is less than \$13/hour.

1<sup>st</sup> Payroll period: Sunday through Saturday

1<sup>st</sup> Pay day: Wednesday

IF YOU OFFER TO TAKE A USE OUR COMPANY TRANSPORTATION PICKUP AND OR DROP OFF SERVICES, **THE PRICE IS \$10 PER ONE WAY OR \$20 FOR ROUND TRIP.**

Electronic Checks or Direct Deposits should wait 3 business days for direct deposit to get to your account.

Deductions expect:

Criminal Report: \$ 30.00 - 1<sup>st</sup> paycheck

Uniform: \$20.00 Each. – following paycheck(s).

Employee Signature: X \_\_\_\_\_ Date: \_\_\_\_\_

Imperial Caregivers LLC, Representative.

Signature: XX \_\_\_\_\_ Date: \_\_\_\_\_



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# PHYSICAL DUE DAY OF HIRE

Please call Imperial Caregivers at (TOLL FREE): (800) 674-3221 to let us know when your physical and 2-Step PPD are scheduled.

Date of Appointment: \_\_\_\_\_

DATE OF FIRST CASE (DOFC): \_\_\_\_\_



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## **MEMO**

**FROM: IMPERIAL CAREGIVERS ACCOUNTS**  
**TO: MANAGER. ALL IMPERIAL EMPLOYEES.**  
**SUBJECT: LIVE-IN WORK HOURS PER DAY**  
**DATE: 07/20/2020**

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All Live-in Aides are supposed to work and be paid for 8 hours per day. At any time, you are working more than 8 hours a day, please contact our office so that we can advise our client on the extra hours you need to get paid for. Such issues will need to be addressed so contact our office as soon as possible.

Note: All Employees working more than 40 hours a week must be paid a time and half (1.5) as overtime rate. This memo does not affect the already set rules for overtime.

Please if you get into such a situation or have any questions regards to this memo, contact our office at (973) 991-3736 during our office hours, Monday to Friday 10am to 5pm and speak to the Office Manager.

I, \_\_\_\_\_ (Name of Aide), hereby acknowledge that I have read, understood, and received a copy of this memo.

Aide's Signature: \_\_\_\_\_

Today's Date: \_\_\_\_\_

# IMPERIAL CAREGIVERS - 2021 WEEKLY PAY CYCLE

Start Date	End Date	Pay Day
7/11/2021	7/17/2021	7/28/2021
7/18/2021	7/24/2021	8/4/2021
7/25/2021	7/31/2021	8/11/2021
8/1/2021	8/7/2021	8/18/2021
8/8/2021	8/14/2021	8/25/2021
8/15/2021	8/21/2021	9/1/2021
8/22/2021	8/28/2021	9/8/2021
8/29/2021	9/4/2021	9/15/2021
9/5/2021	9/11/2021	9/22/2021
9/12/2021	9/18/2021	9/29/2021
9/19/2021	9/25/2021	10/6/2021
9/26/2021	10/2/2021	10/13/2021
10/3/2021	10/9/2021	10/20/2021
10/10/2021	10/16/2021	10/27/2021
10/17/2021	10/23/2021	11/3/2021
10/24/2021	10/30/2021	11/10/2021
10/31/2021	11/6/2021	11/17/2021
11/7/2021	11/13/2021	11/24/2021
11/14/2021	11/20/2021	12/1/2021
11/21/2021	11/27/2021	12/8/2021
11/28/2021	12/4/2021	12/15/2021
12/5/2021	12/11/2021	12/22/2021
12/12/2021	12/18/2021	12/29/2021
12/19/2021	12/25/2021	1/5/2022

**\*For Direct Deposit payments ( Please allow 2 days from Pay Day to reflect in your bank account).**