

Since 1983

mancon

1961 Diamond Springs Road
Virginia Beach, VA 23455
Phone (757) 460-6308
Fax (757) 457-9345

COLORADO EMPLOYEES

MANCON Employees,

Included in this packet is the following information:

1. Anti-Discrimination Poster
2. Minimum Wage Poster
3. Notice to Employees regarding Unemployment Insurance
4. Workers Compensation
5. Pay Day Notice

If you have any questions, please contact your supervisor.

Thanks,
Human Resources



COLORADO

Department of
Regulatory Agencies

Colorado Civil Rights Division

Colorado Law Prohibits Discrimination in places of: **EMPLOYMENT** C.R.S. § 24-34-401 et seq.

IT SHALL BE A DISCRIMINATORY OR UNFAIR EMPLOYMENT PRACTICE:

to REFUSE TO HIRE, to DISCHARGE, to PROMOTE or DEMOTE, to HARASS during the course of employment, or to discriminate IN MATTERS of COMPENSATION, TERMS, CONDITIONS, or PRIVILEGES of employment.

BECAUSE OF:

DISABILITY, RACE, CREED, COLOR, SEX, SEXUAL ORIENTATION (including TRANSGENDER STATUS), RELIGION, AGE, NATIONAL ORIGIN or ANCESTRY, or, in certain circumstances, MARRIAGE TO A COWORKER.

REASONABLE ACCOMMODATIONS FOR DISABILITIES:

An employee with a disability is entitled to a reasonable accommodation(s) which is necessary to perform the essential functions of the job. An accommodation is not reasonable if its provision would result in an undue hardship on the employer's business.

PREGNANT WORKERS FAIRNESS ACT – C.R.S. § 24-34-402.3

An employee with a health condition(s) related to pregnancy or physical recovery from childbirth is entitled to a reasonable accommodation(s) necessary to perform the essential functions of the job. An accommodation is not reasonable if its provision would result in an undue hardship on the employer's business.

RETALIATION PROHIBITED – C.R.S. § 24-34-402(e)

It is a discriminatory act to retaliate against a person who opposes a discriminatory practice or who participates in a discrimination investigation, proceeding or hearing.

SHARING WAGE INFORMATION PROTECTED – C.R.S. § 24-34-402(i)

An employer shall not discharge, discipline, discriminate against, coerce, intimidate, threaten, or interfere with an employee or person due to an inquiry, disclosure or discussion of wages. An employer shall not require an employee to waive the right to disclose wage information.

**TO FILE A COMPLAINT OF DISCRIMINATION, OR FOR MORE INFORMATION CONTACT
THE COLORADO CIVIL RIGHTS DIVISION; 1560 BROADWAY, LOBBY WELCOME CENTER,
SUITE # 110, DENVER, CO 80202**

**MAIN PHONE: 303-894-2997; HOTLINE ESPANOL: 720-432-4294; TOLL-FREE: 800-262-4845; V/TTD RELAY: 711;
FAX: 303-894-7830; EMAIL: DORA_CCRD@STATE.CO.US; DORA.COLORADO.GOV/CRD**

**EMPLOYMENT DISCRIMINATION COMPLAINTS MUST BE FILED WITHIN SIX (6) MONTHS
AFTER THE ALLEGED DISCRIMINATORY ACT OCCURRED.**



COLORADO MINIMUM WAGE ORDER 35 POSTER

(Poster is effective January 1, 2020 through expected release of [Colorado Overtime and Minimum Pay Standards \(COMPS\) Order #36](#) on March 1, 2020)

COLORADO DEPARTMENT OF LABOR AND EMPLOYMENT
DIVISION OF LABOR STANDARDS AND STATISTICS
www.colorado.gov/cdle/labor

\$12.00

per hour effective January 1, 2020

\$11.10 per hour effective January 1, 2019 **\$10.20** per hour effective January 1, 2018

In addition to state minimum wage requirements, there are also federal minimum wage requirements. If an employee is covered by both state and federal minimum wage laws, the law that provides a higher minimum wage or sets a higher standard shall apply.

Amended Colorado Minimum Wage Order Number 35 regulates wages, hours, overtime, and working conditions for covered employees in the following industries: Retail and Service; Commercial Support Service; Food and Beverage; Health and Medical.

MINIMUM WAGE

Minimum wage shall be paid to all adult employees and emancipated minors whether employed on an hourly, piecework, commission, time, task, or other basis. This minimum wage shall be paid to employees who receive the state or federal minimum wage.

WORKDAY

Any consecutive twenty-four (24) hour period starting with the same hour each day and the same hour as the beginning of the workweek. The workday is set by the employer and may accommodate flexible work shift scheduling.

WORKWEEK

Any consecutive seven (7) day period starting with the same calendar day and hour each week. A workweek is a fixed and recurring period of 168 hours, seven (7) consecutive twenty-four (24) hour periods.

OVERTIME

Employees shall be paid time and one-half of the regular rate of pay for any work in excess of: (1) forty (40) hours per workweek; (2) twelve (12) hours per workday; or (3) twelve (12) consecutive hours without regard to the starting and ending time of the workday (excluding duty free meal periods), whichever calculation results in the greater payment of wages. Hours worked in two or more workweeks shall not be averaged for computation of overtime. Performance of work in two or more positions at different pay rates for the same employer shall be computed at the overtime rate based on the regular rate of pay for the position in which the overtime occurs, or at a weighted average of the rates for each position, as provided in the Fair Labor Standards Act.

TIPPED EMPLOYEE MINIMUM WAGE

\$8.98 per hour effective January 1, 2020

\$8.08 per hour effective January 1, 2019

\$7.18 per hour effective January 1, 2018

A tipped employee is defined as any employee engaged in an occupation in which he or she customarily and regularly receives more than \$30.00 a month in tips. Tips include amounts designated as a "tip" by credit card customers on their charge slips. Nothing herein contained shall prevent an employer covered hereby from requiring employees to share or allocate such tips or gratuities on a pre-established basis among other employees of said business who customarily and regularly receive tips. Employer-required sharing of tips with employees who do not customarily and regularly receive tips, such as management or food preparers, or deduction of credit card processing fees from tipped employees, shall nullify allowable tip credits towards the minimum wage authorized in section 3(c). No more than \$3.02 per hour in tip income may be used to offset the minimum wage of tipped employees.

REST PERIODS

Every employer shall authorize and permit rest periods, which insofar as practicable, shall be in the middle of each four (4) hour work period. A compensated ten (10) minute rest period for each four (4) hours or major fractions thereof shall be permitted for all employees. Such rest periods shall not be deducted from the employee's wages. It is not necessary that the employee leave the premises for said rest period.

MEAL PERIODS

Employees shall be entitled to an uninterrupted and "duty free" meal period of at least a thirty minute duration when the scheduled work shift exceeds five consecutive hours of work. The employees must be completely relieved of all duties and permitted to pursue personal activities to qualify as a non-work, uncompensated period of time. When the nature of the business activity or other circumstances exist that makes an uninterrupted meal period impractical, the employee shall be permitted to consume an "on-duty" meal while performing duties. Employees shall be permitted to fully consume a meal of choice "on the job" and be fully compensated for the "on-duty" meal period without any loss of time or compensation.

UNIFORMS

Where the wearing of a particular uniform or special apparel is a condition of employment, the employer shall pay the cost of purchases, maintenance, and cleaning of the uniforms or special apparel. If the uniform furnished by the employer is plain and washable and does not need or require special care such as ironing, dry cleaning, pressing, etc., the employer need not maintain or pay for cleaning. An employer may require a reasonable deposit (up to one-half of actual cost) as security for the return of each uniform furnished to employees upon issuance of a receipt to the employee for such deposit. The entire deposit shall be returned to the employee when the uniform is returned. The cost of ordinary wear and tear of a uniform or special apparel shall not be deducted from the employee's wages or deposit.

RECOVERY OF WAGES

An employee receiving less than the legal minimum wage applicable to such employee is entitled to recover in a civil action the unpaid balance of the full amount of such minimum wage, together with reasonable attorney fees and court costs, notwithstanding any agreement to work for a lesser wage, pursuant to C.R.S. § 8-6-118 (2020). Alternatively, an employee may elect to pursue a minimum wage complaint through the division's administrative procedure as described in the Colorado Wage Act, C.R.S. § 8-4-101, et seq., (2020).

DUAL JURISDICTION

Whenever employers are subject to both federal and Colorado law, the law providing greater protection or setting the higher standard shall apply. For information on federal law contact the nearest office of the U. S. Department of Labor, Wage and Hour Division, 1999 Broadway, Suite 710, Denver, CO 80201-6550. Telephone (720) 264-3250.

MUST BE POSTED IN AN AREA FREQUENTED BY EMPLOYEES WHERE IT MAY BE EASILY READ

cdle_labor_standards@state.co.us | 303-318-8441 | 1-888-390-7936



NOTICE TO WORKERS

YOU HAVE THE RIGHT TO BE:

- Properly classified as an employee or an independent contractor
- Paid accurately and timely for the services you perform

There are resources available to you if you believe you are being subject to improper classification or inaccurate payment practices by your employer. For more information, go to WorkRight.cdle.co.

Employers are required to follow the law when paying hourly wages, overtime, and properly covering you for unemployment insurance and workers' compensation purposes. As a worker, you have certain rights as an *employee vs. independent contractor*.

Improper classification (often called misclassification) of employees as independent contractors and other labor law violations create many problems, both for law-abiding businesses and for workers in Colorado.

If you believe you have been **improperly classified** as an independent contractor and are really performing duties that fit the criteria of an employee, visit colorado.gov/cdle/TipForm, or call us at 303-318-9100 and select Option 4. To be classified as an employee, you must meet the criteria in Colorado Revised Statute 8-70-115. You can read the law online and find out more at coloradoui.gov/ProperClassification.

As an *employee*, you are entitled to unemployment insurance benefits if you become unemployed through no fault of your own. **Your employer contributes to unemployment insurance and cannot deduct this from your wages.**

If you become unemployed and wish to file for unemployment insurance benefits, go to coloradoui.gov and click on File a Claim. If your hours of work and pay are reduced, you may be entitled to partial unemployment benefits.

If you cannot access a computer, call one of the following numbers: 303-318-9000 (Denver-metro area) or 1-800-388-5515 (outside Denver-metro area); hearing impaired 303-318-9016 (TDD Denver-metro area) or 1-800-894-7730 (TDD outside Denver-metro area).

EMPLOYERS ARE REQUIRED BY LAW TO POST THIS NOTICE

Colorado Employment Security Act, 8-74-101(2); Regulations Concerning Employment Security 7.3.1 through 7.3.5
Employers can download copies of this poster at coloradoui.gov/employer, then click on Forms / Publications.



COLORADO
Department of
Labor and Employment





AVISO A LOS TRABAJADORES

USTED TIENE EL DERECHO DE:

- Estar correctamente clasificado como un empleado o un contratista independiente.
- Ser pagado correctamente y puntualmente por los servicios que realiza.

Hay recursos disponibles para usted si cree que está sujeto a una clasificación incorrecta o prácticas de pago incorrectas por parte de su empleador. Para obtener más información, visite WorkRight.cdle.co.

Los empleadores están obligados a cumplir con la ley al pagar salarios por hora, horas extras, y que lo cubra adecuadamente para propósitos del seguro de desempleo y compensación de trabajadores. Como trabajador usted tiene ciertos derechos, sea como *empleado o contratista independiente*.

La clasificación incorrecta de los empleados como contratistas independientes y otras violaciones de la ley laboral crean muchos problemas, tanto para las empresas que respetan la ley y para los trabajadores en Colorado.

Si cree que ha sido **clasificado incorrectamente** como un contratista independiente y realmente está desempeñando labores que encajan con los criterios de un empleado, visite colorado.gov/cdle/TipForm, o llámenos al 303-318-9100 y presione la Opción 4. Para ser clasificado como empleado, debe cumplir con el criterio del Estatuto Revisado de Colorado (Colorado Revised Statute) 8-70-115. Puede leer la ley en línea (sólo en inglés) y obtener más información en coloradoui.gov/ProperClassification.

Como *empleado*, usted tiene derecho a beneficios de seguro de desempleo al quedar sin empleo, y sin que haya sido su culpa. **Su empleador contribuye al seguro de desempleo y no puede deducirlo de su salario.**

Si se queda sin empleo y desea solicitar beneficios de seguro de desempleo, vaya a coloradoui.gov y haga clic en File a Claim. Si sus horas de trabajo y sueldo han sido reducidas, usted puede tener derecho a beneficios parciales de desempleo.

Si no puede acceder a una computadora, llame a uno de los siguientes números: 303-318-9333 (área metropolitana de Denver) o al 1-866-422-0402 (fuera del área metropolitana de Denver); personas con dificultades auditivas 303-318-9016 (TDD Denver-metro area) o al 1-800-894-7730 (TDD fuera del área de Denver-metro).

POR LEY EL EMPLEADOR ESTÁ OBLIGADO A PUBLICAR ESTE AVISO

Colorado Employment Security Act (Ley de Seguridad de Empleo de Colorado), 8-74-101 (2); Regulations Concerning Employment Security (Reglamentos Relativos a la Seguridad de Empleo), 7.3.1 a 7.3.5

Los empleadores pueden descargar copias de este póster en coloradoui.gov/employer, luego hacer clic en Forms / Publications.

WARNING

**IF YOU ARE INJURED ON THE JOB,
WRITTEN NOTICE OF YOUR INJURY MUST
BE GIVEN TO YOUR EMPLOYER WITHIN
FOUR WORKING DAYS AFTER THE
ACCIDENT, PURSUANT TO SECTION 8-43-
102(1) AND (1.5), COLORADO REVISED
STATUTES.**

**IF THE INJURY RESULTS FROM YOUR USE
OF ALCOHOL OR CONTROLLED
SUBSTANCES, YOUR WORKERS'
COMPENSATION DISABILITY BENEFITS MAY
BE REDUCED BY ONE-HALF IN
ACCORDANCE WITH SECTION 8-42-
112.5, COLORADO REVISED STATUTES.**

AVISO

SI SE LASTIMA EN EL TRABAJO, DEBE DARLE UN AVISO POR ESCRITO A SU EMPLEADOR DENTRO DE CUATRO DÍAS LABORABLES DEL ACCIDENTE, SEGÚN A LA SECCIÓN DE LOS ESTATUOS REVISADOS DE COLORADO 8-43-102(1) Y (1.5).

SI EL ACCIDENTE RESULTA DEBIDO AL USO DE ALCOHOL O UNA SUSTANCIA CONTROLADA, SUS BENEFICIOS DE LA INCAPACIDAD DE LA COMPENSACIÓN DE LOS TRABAJADORES PUEDEN SER REDUCIDOS POR UN MEDIO EN ACUERDO DE LA SECCIÓN DE LOS ESTATUOS REVISADOS DE COLORADO 8-42-112.5.

COLORADO DEPARTMENT OF LABOR AND EMPLOYMENT
DIVISION OF WORKERS' COMPENSATION

Colorado Workers' Compensation Information

Your employer has workers' compensation coverage for employees through:

CNA
PO Box 8317
Chicago, IL 60680

Workers' compensation is a type of insurance coverage that employers must provide to their employees. The cost of workers' compensation insurance is paid entirely by the employer and may not be deducted from an employee's wages.

If you are injured or sustain an occupational disease while at work, you may be entitled to compensation benefits as provided by law. **WRITTEN NOTICE MUST BE GIVEN TO YOUR EMPLOYER WITHIN 4 WORKING DAYS OF THE ACCIDENT.** If you don't report your injury or occupational disease promptly your benefits may be reduced.

If you are unable to work as the result of a work-related injury or occupational disease, compensation (wage replacement) benefits will be based on 2/3 of your average weekly wage up to a maximum set by law. No compensation is payable for the first 3 days' disability unless the period of disability exceeds two weeks.

You are entitled to reasonable and necessary medical treatment of compensable injuries or occupational diseases. If you notify your employer of an injury or occupational disease and are not offered medical care, you may select the services of a licensed physician or chiropractor.

You may file a Worker's Claim for Compensation with the Division of Workers' Compensation. To obtain forms or information regarding the workers' compensation system, you may call Customer Service at 303-318-8700 or toll-free at 1-888-390-7936 or visit our website at www.colorado.gov/cdle/dwc.

COLORADO DIVISION OF WORKERS' COMPENSATION
633 17th Street, Suite 400, Denver, CO 80202-3626

Any information provided below comes from your employer and is specific to this place of employment:

All Colorado MANCON Employees

COLORADO DEPARTMENT OF LABOR AND EMPLOYMENT
DIVISION OF WORKERS' COMPENSATION

Información De Indemnización Por Accidentes Laborales De Colorado

Su empleador tiene cobertura de indemnización por accidentes laborales para empleados completamente:

CNA PO Box 8317 Chicago, IL 60680

La indemnización por accidentes laborales es un tipo de cobertura de seguro que los empleadores deben proveer a sus empleados. El coste del seguro de indemnización por accidentes laborales es pagado completamente por el empleador y no puede ser deducido de los sueldos de un empleado.

Si usted sufrió un accidente o mantiene una enfermedad profesional en su trabajo, usted puede calificar para los beneficios de compensación. Usted tiene la obligación de NOTIFICAR POR ESCRITO A SU EMPLEADOR DENTRO DE 4 DÍAS DEL ACCIDENTE. Si usted no informa sobre su accidente o enfermedad profesional inmediatamente sus beneficios podrían ser reducidos.

Si usted no puede trabajar por el resultado de su accidente de trabajo o la enfermedad profesional, los beneficios de compensación serán pagados sobre la base de 2/3 de su sueldo semanal hasta un máximo fijado por ley. Los primeros 3 días no son cubiertos por la aseguranza.

Usted está autorizado para el tratamiento médico que sea razonable y necesario si usted sufrió lesiones en el trabajo o enfermedades profesionales. Si usted notifica a su empleador sobre una lesión o la enfermedad profesional y no le ofrecen atención médica adecuada, usted puede seleccionar los servicios de otro médico que tenga licencia o que sea quiropráctico.

Usted puede reportar su propio reclamo si su empleador no lo ha hecho. Para obtener formularios o información acerca de accidentes laborales usted puede llamar al servicio de asistencia al numero 303-318-8700 o sin costo a 1-888-390-7936 o visitar nuestro sitio web en www.colorado.gov/cdle/dwc.

COLORADO DEPARTMENT OF LABOR AND EMPLOYMENT
633 17th St. Suite 400, Denver, CO 80202-3660

Cualquier información proveída abajo viene directamente de su empleador y es exclusivo de este lugar del empleo:

All MANCON Colorado employees



COLORADO DEPARTMENT OF LABOR AND EMPLOYMENT
DIVISION OF LABOR
www.colorado.gov/cdle/labor

NOTICE OF PAYDAYS

In accordance with 8-4-107, C.R.S.:

Every employer shall post and keep posted conspicuously at the place of work if practicable, or otherwise where it can be seen as employees come or go to their places of work, or at the office or nearest agency for payment kept by the employer a notice specifying the regular paydays and the time and place of payment, in accordance with the provisions of section 8-4-103, and also any changes concerning them that may occur from time to time.

Pay periods can be no greater duration than a calendar month or 30 days, whichever is longer. Paydays must occur no later than 10 days following the close of each pay period. 8-4-103, C.R.S.

EMPLOYEES ARE PAID ON REGULAR PAYDAYS AS FOLLOWS:

Time: **Around 7th and 22nd of each month**

Place: **Paid direct deposit or mailed check**

This form is provided as a courtesy by the Colorado Division of Labor. Other Notice of Paydays Posters may be acceptable provided that they contain the elements and information required by 8-4-107, C.R.S.