

IMPORTANT: By filing this claim with the Compliance & Investigations Bureau you are electing a remedy which may prevent you from pursuing this claim elsewhere, including civil court. Filing this complaint does not guarantee payment or a finding in your favor.

FILL OUT THIS WAGE CLAIM FORM IF:

- ✓ You have not been paid in full for time worked, final wages, overtime, minimum wage, commissions, production based bonuses, or received a non-sufficient fund payroll check.
- Your employer did not pay out your earned vacation or has a policy to pay out any unused paid time off (PTO) and failed to do so.
- ✓ Your employer did not pay you prevailing wages or fringe benefits on a public works project.
- ✓ The employer withheld for damages, shortages, or mistakes.

THIS OFFICE DOES NOT HAVE JURISDICTION WHEN:

- ✓ The business is not located nor did you perform work in Montana during the period claimed.
- ✓ You are claiming for expenses. Expenses are not considered wages, therefore you would need to pursue as separate civil action.
- ✓ You are claiming severance pay, time not worked, holiday and sick pay in the private sector.
- ✓ You have filed a law suit against the employer for the same wage issues.

PROVIDE ALL THE REQUESTED INFORMATION BELOW AND COMPLETELY FILL OUT THE WAGE CLAIM FORM WITH:

- ✓ Your name, complete mailing address, e-mail address and telephone number, and
- ✓ The complete name and mailing address of your employer, and
- Your reason for filing the claim **including** the period claimed **and** total amount claimed for **each** issue claimed.
- ✓ If possible, copies of documents as evidence should be included with your claim, such as employment contract, wage agreement, collective bargaining agreement, commission statements, invoices, time records, list of hours worked, check stubs, written policies/contracts for vacation pay, paid time off, or bonus/commissions.

INVESTIGATION PROCESS

- ✓ The claim is assigned to a compliance specialist to review for completeness and determine if the claim is within the authority of the Compliance & Investigations Bureau. If the claim is within the Bureau's authority, the parties to the claim are notified by mail that the claim is being investigated.
- ✓ All compliance specialists will thoroughly investigate the claim in compliance with the law.
- The time required to complete an investigation depends on the cooperation of the parties involved in the process and the complexity of the claim.
- ✓ You will be contacted if additional information is needed.
- ✓ Upon conclusion of the investigation a copy of the decision will be sent by mail to all parties involved.

YOU MUST NOTIFY THE BUREAU IF:

- ✓ You receive any payment directly from your employer.
- ✓ You change your address or contact telephone/cell phone number. Failure to report this information will delay the investigation of your claim. The Bureau cannot mail any payments received from the employer to you without your current address.

If you have any questions, please contact the Compliance & Investigations Bureau at (406) 444-6543. You can also visit our website at <u>www.mtwagehourbopa.com</u> for more information.