

DEMAND FOR PAYMENT OF WAGES

TO: _____

(COMPANY NAME)

FROM: _____

(EMPLOYEE)

(OWNERS - OFFICERS)

(STREET ADDRESS)

(STREET ADDRESS)

(CITY, STATE, ZIP)

(CITY, STATE, ZIP)

CHECK THE BOX(ES) BELOW THAT APPLY:

Termination of employment – wages and compensation due

- When termination by an employer occurs, wages and compensation are due and payable IMMEDIATELY unless one of the following exceptions is met:
1. If the employer's accounting unit, responsible for payroll checks is not regularly scheduled to be operational. Wages are due and payable no later than six hours after the start of the employer's accounting unit's next regular workday.
 2. If the employer's accounting unit is located off the work site, the employer shall deliver the check for wages due no later than twenty-four hours after the start of the accounting unit's next regular workday.
- When the employee quits or resigns, wages and compensation are due and payable upon the next regular payday

I hereby make a formal demand of payment of wages and compensation due me in accordance with Title 8, Article 4 of Colorado Revised Statutes, as amended. Refusal to pay me or my designated agent may subject you to a significant penalty that may meet or exceed 125% of the amount owed, or up to 10 days of compensation, whichever is greater, pursuant to 8-4-109, C.R.S..

Non-payment of wages and compensation (also vacation, commission, bonuses, etc.)

All wages and compensation shall be due and payable on regular paydays no later than ten days following the close of each pay period unless the employer and the employee mutually agree on an alternative period.

I hereby make a formal demand for payment of wages and compensation due me in accordance with Title 8, Article 4 of the Colorado Revised Statutes, as amended. Refusal to pay me or my designated agent in accordance with the law may subject you to penalties of 50 dollars per day commencing from the date that such wages first became due and payable.

I AM OWED APPROXIMATELY \$ _____ IN WAGES AND COMPENSATION

(Employee Signature)

(Date)

THIS FORM IS PROVIDED BY THE DIVISION OF LABOR AS AN ADMINISTRATIVE COURTESY. THE DIVISION OF LABOR HAS MADE NO DETERMINATION AS TO THE VALIDITY OF THE CHARGES.

INSTRUCTIONS FOR THE DEMAND FOR PAYMENT OF WAGES FORM

SEND ORIGINAL TO YOUR EX-EMPLOYER

The enclosed Demand for Payment of Wages Form protects your right to file a claim in the appropriate court for monies that may be due from your former employer. The form also may assist in obtaining penalties that can be assessed by a judge through a court action.

Once you have filled out this form, make a photocopy of the form for yourself and **SEND THE ORIGINAL FORM TO YOUR EX-EMPLOYER.** You may wish to send the form by certified mail. Do not send the Demand for Payment of Wages Form to the Division of Labor; if you wish for the Colorado Division of Labor to assist you, then you must complete and submit to the Division a separate Request for Mediation Form.

This Demand for Payment of Wages may be filed for compensation proven to be due an employee pursuant to CRS 8-4-101 *et seq.* If you do not provide this form to your former employer within 60 days after the date of separation, you may not be entitled to the penalties provided for under the statute [CRS 8-4-109 (3)].

You may file for wages in Small Claims Court in the county the employer lives, works, or has an office at the time you file your claim. You do not need an attorney to file. Check with the clerk of the court for more information.

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