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COOK COUNTY COMMISSION ON HUMAN RIGHTS 69 WEST WASHINGTON STREET SUITE 3040 CHICAGO, ILLINOIS 60602-3007 312/603-1100 OFFICE 312/603-9988 FAX

> RANJIT HAKIM EXECUTIVE DIRECTOR

Drafting a Minimum Wage Ordinance Complaint

The staff of the Cook County Commission on Human Rights ("Commission") is available Monday through Friday (excluding County holidays) from 9 a.m. to 4 p.m. to assist you with drafting and filing a complaint if you believe that your employer has violated the Cook County Minimum Wage Ordinance ("Ordinance"). If you are not available during those hours, Commission staff may also be able to assist you at an alternative time by prior appointment. To request an appointment, please call 312.603.1100 or email human.rights@cookcountyil.gov.

If you (or your attorney) want to draft a complaint without the assistance of Commission staff, first review the Commission's Interpretative and Procedural Rules for the Ordinance at Rules 5.02 and 5.03.

In addition, here are some helpful tips:

- Be sure to file your complaint as soon as possible and definitely within 3 years of the alleged violation. If you are filing more than 3 years after the alleged violation, be sure to include facts explaining why you did not discover the alleged violation sooner.
- Be sure to include in the complaint facts that explain why the Ordinance applies to you *and* your employer.
 - The Ordinance does not apply to every employer (*e.g.*, employers of non-domestic workers with fewer than four employees are exempt), and some employees are exempt from coverage (*e.g.*, employees under the age of 18; employees working for an employer in a Cook County municipality that has pre-empted the Ordinance; employees covered by a Collective Bargaining Agreement that was executed prior to July 1, 2017 or that expressly waives the employees' rights under the Ordinance).
 - If your employer is covered based on the location of its business facilities, include the address of those facilities in your complaint (if your employer has more than one such location, use the location where you worked or that is otherwise most relevant to your claim). If your employer is covered because it has a business license issued by Cook County, say what that license is in the complaint.
 - In order to be covered by the Ordinance, you must have worked at least 2 hours in Cook County for your employer, so say when and where you did that in your complaint. If you are not a domestic worker, explain that your employer has at

least three other employees.

- Be sure to include in the complaint facts that explain how your employer violated the Ordinance. If you are alleging that your employer underpaid you, be sure to include the date you were hired, your job title, where you worked for your employer, how many hours you worked for your employer there and what your employer paid you for that work. If during the time you have worked for your employer, your wages have changed, note what your wages were at any given time or work location.
- While it is not essential that you have documentation to support every fact you allege, your case is more likely to succeed if you have records demonstrating how many hours you worked and what your employer paid you. Paychecks, paystubs, direct deposit notices, work schedules, W-2 or 1099 tax records and any other piece of paper that reflects how many hours you worked for an employer, where you worked for the employer and how much you were paid are all very useful and should be preserved and shared with the Commission when you are filing a complaint.
- Your employer is prohibited from retaliating against you just because you are filing a complaint alleging a violation of the Ordinance. If you believe that your employer is retaliating against you because you have filed, or are contemplating filing, a complaint, contact the Commission immediately.

Attached is the Minimum Wage Complaint Intake Sheet to help in preparing your complaint. We strongly suggest completing as much of this Complaint Intake Sheet as you can before you contact the Commission or an attorney to draft a complaint. That said, it is okay if you cannot answer every question. Walking through the Complaint Intake Sheet with Commission staff or an attorney will help clarify whether you have a colorable claim under the Ordinance and may help speed up the process of obtaining relief, where available.

Sincerely, Ranjit Hakim Executive Director Cook County Commission on Human Rights

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MINIMUM WAGE COMPLAINT INTAKE SHEET

EMPLOYEE (Complainant) Contact Information

Name:		
Address:		
City:	State:	Zip:
Phone:	Email:	

EMPLOYER (Respondent) Contact Information

Provide the following information about the employer you believe violated the Cook County Minimum Wage Ordinance:

Name:		
Address:		
City:	State:	Zip:
Phone:	Email:	
If relevant, identify the individu violation alleged:	ual(s) or department you believe is res	sponsible for the Ordinance

Name: _____ Title/Department: _____

ALLEGATIONS SHOWING JURISDICTION

Provide the following information to show that you and your employer are covered by the Ordinance and that you have brought your complaint in a timely fashion.

A. Date of Alleged Violation:

1. Date of alleged Ordinance violation:

- 2. If a continuing violation, list the last date on which the violation most recently occurred:
- 3. If more than three years have passed since the date provided above, provide:
 - a. Date when you first discovered the violation: ______ and
 - b. A brief explanation of the reason you did not discover the violation for more than three years:

B. Covered Employee:

- 1. On or about [DATE]* ______, I performed a minimum of two hours of work for [EMPLOYER] ______ while physically present in a location that is within the geographic boundaries of Cook County.
 - (* Please provide first such date this occurred.)

Here is a brie	f description	of that	work	and	the	specific	location	where it	was
performed:	_					_			

If you have performe	d two or more such	hours of work	for EMPLOY	ER in more
than one municipality	y in Cook County, p	please list those	other municip	palities here:

(Note: if your job involves working in a large number of locations throughout Cook County, you are not required to list all such municipalities.)

2. Check any that apply and be sure to discuss with Commission Staff or your attorney before filing:

□ I am in a Union. Name of Union and Local: _____

□ I am an employee of a Subsidized Temporary Youth Employment Program.

□ I am an employee of a Subsidized Transitional Employment Program.

 \Box I am in the first 90 calendar days of my employment.

 \Box I am under the age of 18.

□ I am a employed to perform work as a camp counselor.

□ My earning capacity is impaired by age, physical or mental deficiency, or injury.

□ I am licensed as a "learner" by the Illinois Commission of Labor.

□ I am employed in agriculture or aquaculture.

 \Box I am employed as an outside salesperson.

□ I am employed as a member of a religious corporation or organization.

□ I am a student employed at an accredited Illinois college or university.

C. Covered Employer:

1. I am not a Domestic Worker for my EMPLOYER, but my EMPLOYER has at least three other employees.

Here are the names or a brief description of the jobs/titles of at least three other employees of my EMPLOYER:

OR

□ I am a Domestic Worker for my EMPLOYER.

Here is the street address of that Business Facility and a brief description of the facility itself (*e.g.*, store, warehouse):

(Note: if your Employer has more than one Business Facility that is located within the geographic boundaries of Cook County, please describe the location where you work for Employer or that is otherwise most relevant to the alleged violation.)

OR

☐ My EMPLOYER has or should have a Cook County license.

Here is the type of Cook County license:

□ General Business License, or

□ Other (describe)

SPECIFIC ALLEGATIONS OF VIOLATION(S)

A. If claim of <u>UNDERPAYMENT</u>

- 1. I started working for my EMPLOYER on or about the following date: _____
- 2. I am still working for EMPLOYER

OR

□ I am no longer working for EMPLOYER and my last day of employment was:

3. My current (or most recent) job title or position is: _____

- 4. Here is a brief description of the kind of work I perform for EMPLOYER:
- 5. The location where I perform the majority of my work for EMPLOYER, if any, is:
- 6. If the above location is not in Cook County, here is a brief description of the work I perform/have performed for EMPLOYER within Cook County:

7	I am/mag maid h	. EMDLOVED	on the fellowing	havin (ahaal	all that apply).
1.	I am/was paid b	y EMPLO I EK	on the following	Dasis (check	an that apply):

 \Box salary \Box hourly \Box gratuities (tips) \Box overtime \Box comp time \Box other: 8. I believe I was paid less than the applicable Cook County Minimum Wage for work that I performed for EMPLOYER in Cook County. Here is the relevant information: From (dd/mm/yyyy): _____ To (dd/mm/yyyy): _____ Hours Worked: _____ Type (e.g., regular, overtime) _____ Amount Paid (specify if per hour or pay period): Amount of Tips (if applicable): Location Where Work Performed: From (dd/mm/yyyy): _____ To (dd/mm/yyyy): _____ Hours Worked: _____ Type (e.g., regular, overtime) _____ Amount Paid (specify if per hour or pay period): _____ Amount of Tips (if applicable): Location Where Work Performed: From (dd/mm/yyyy): _____ To (dd/mm/yyyy): _____ Hours Worked: _____ Type (*e.g.*, regular, overtime) _____ Amount Paid (specify if per hour or pay period): _____ Amount of Tips (if applicable): Location Where Work Performed: 9. I have communicated with my EMPLOYER regarding these underpayments. OR

□ I have not communicated with my EMPLOYER regarding these underpayments.

10. Check any that apply and begin gathering documents to share with the Commission that relate to your allegations:

 \Box My EMPLOYER has provided me with documentation of my hours worked, the location of that work and/or my rate of pay (*e.g.*, paychecks, paystubs, W-2 or 1099 tax forms, work schedules, *etc.*), and I have retained some or all of that documentation.

☐ My EMPLOYER has provided me with documentation of my hours worked, the location of that work and/or my rate of pay, and I have not retained any of that documentation.

☐ My EMPLOYER has not provided me with any documentation of my hours worked, the location of that work and/or my rate of pay.

 \Box I have documentation that was NOT provided to me by my EMPLOYER that reflects my hours worked, the location of that work and/or my rate of pay (*e.g.*, personal calendar or datebook, a work diary, a log or notes created to track time and earnings, copies of filed taxes, *etc.*).

 \Box I have no documentation in my possession, custody or control that reflects my hours worked for my employer, the location of that work and/or my rate of pay.

11. The following persons witnessed and/or have knowledge of such underpayment (include contact information to the extent that you have it):

12. Please provide here any additional reasons for your belief that you were underpaid and describe any additional evidence in support: _____

B. If claim of **FAILURE TO PROVIDE NOTICE**

1. □ My EMPLOYER failed to provide me with written notice of my rights under the Cook County Minimum Wage Ordinance with my first paycheck after July 1, 2017. The date of my first paycheck after July 1, 2017 was: _____

☐ My EMPLOYER provided me with an inadequate written notice of my rights under the Cook County Minimum Wage Ordinance with my first paycheck after July 1, 2017.

		Here is a copy of the written notice that my EMPLOYER provided me on [DATE] It is inadequate because:
2.	the geo	EMPLOYER failed to post in a conspicuous place in a Business Facility within ographic boundaries of Cook County a notice of employees' rights under the County Minimum Wage Ordinance.
		Here is the street address of the Business Facility where the notice should have been posted and description of the specific conspicuous place where I expected to see it (<i>e.g.</i> , break room, water cooler, <i>etc.</i>) but did not:
	OR	
	Count	EMPLOYER posted an inadequate notice of employees' rights under the Cook y Minimum Wage Ordinance in a conspicuous place in a Business Facility the geographic boundaries of Cook County.
		Here is a copy of the notice that my EMPLOYER posted on [DATE] It is inadequate because:

3. The following persons witnessed and/or have knowledge of such underpayment (include contact information to the extent that you have it):

C. ☐ If claim of **<u>RETALIATION</u>**

1.	I engaged in the following protected conduct (e.g., I complained of underpayment):
2.	My EMPLOYER took the following adverse action against me (<i>e.g.</i> , I was discharged):
3.	I believe EMPLOYER took the adverse action described above because of my protected conduct (described above) based on the following reasons:
4.	The location where such retaliation occurred was in Cook County at the following street address:
5.	The following persons witnessed and/or have knowledge of such retaliation (include contact information to the extent that you have it):