

NOTICE TO **EMPLOYEES**

Paid Family Leave Insurance Coverage Provided by:

Liberty Life Assurance Company of Boston

Covering Employees of:

Canon Medical Systems USA, Inc.

Paid Family Leave is insurance that provides job protected paid time off to:

- Bond with a newly born, adopted, or fostered child
- Care for a family member with a serious health condition
- Assist loved ones when a family member is deployed abroad on active military service

How to File:

- Notify your employer at least 30 days in advance, if foreseeable, or as soon as possible
- Submit the Request for Paid Family Leave form to your employer
- Complete and attach the additional documentation as instructed on the request form and submit to the insurance carrier listed below

Employers should NEVER discriminate or retaliate against anyone who requests or takes leave

FOR MORE INFORMATION AND HELP: Visit **ny.gov/PaidFamilyLeave** or call **(844) 337-5303** You can get forms to take Paid Family Leave from

- Your employer,
- The insurance carrier below, or
- ny.gov/PaidFamilyLeave

Liberty Life Assurance Company of Boston 100 Liberty Way Dover, NH 03820 1-800-210-0268

Policy #: GS3-860-066661-NY

Effective From: _01/01/2018

To: 12/31/2018

Statutory

☐ Under a Plan or Agreement

Class(es) of Employees Covered: All Employees Eligible Under The Law

NOTICE OF COMPLIANCE

PRESCRIBED BY THE CHAIR, WORKERS' COMPENSATION BOARD

THIS NOTICE MUST BE POSTED CONSPICUOUSLY IN AND ABOUT THE EMPLOYER'S PLACE OR PLACES OF BUSINESS.