**Early Payroll Request Form**

Employee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I request an early payroll and hereby acknowledge that I will not receive any pay on the next regular patrol schedule. Reason for this early payroll request is an emergency situation as defined:

Emergencies include, but are not limited to, the following circumstances:

\_\_\_Death in family; \_\_\_Major car repair; \_\_\_Theft of funds;

\_\_\_Automobile accident (loss of vehicle use); \_\_\_Accident or sickness;

\_\_\_Destruction or major damage to home; \_\_\_New employee lack of funds **OR**

\_\_\_This request is not an emergency situation; I acknowledge

and authorize a 25.00 administrative fee if approved.

In addition this form must include a written description of the emergency situation as defined above.

Employee Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Approved by employee's supervisor: \_\_\_**Yes \_\_\_No

Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_