



Request for Draw Form

Date: _____

Employee's Name: _____ Phone #: _____

I REQUEST A DRAW ON MY WAGES FOR _____ HOURS EARNED.

Employee Number: _____

Payroll Clerk's Initials: _____ Date of Last Draw: _____

I further understand that if payroll inadvertently generates another check on our regular payroll run for the same days covered on this draw and I accept and cash the erroneous check and don't report it to payroll, it will be considered theft and disciplinary action, up to termination, will ensue.

Employee Signature

Date

Immediate Supervisor Signature

Date

Payroll

Warrant Number

Check Date

Payroll Signature

Process Date

DRAWS WILL ONLY BE DONE ON NON-PAYROLL FRIDAYS.
Draws due by Thursday at 10:00 AM