



MAYOR
Linda Blechinger

CITY CLERK
Joyce Brown

CITY COUNCIL

Peggy J. Langley
Robert L. Vogel III
Taylor Sisk
Jamie Bradley

Donation to Sick Time Emergency Fund

Employee Name		LAST 4 of SSN	
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HOURS DONATED			
	VACATION TIME		MAXIMUM OF
	COMP TIME		40 HOURS CAN BE
	SICK TIME		DONATED PER EMPLOYEE
	TOTAL HOURS		

By signing this form you are agreeing that you are donating time to the Employee Emergency Sick Time Bank pursuant to section 6.20 of the City of Auburn Personnel Manual.

Employee Signature

HR/Payroll

OFFICE USE ONLY			
ATTACHMENTS INCLUDED		DATE PLACED IN FILE	HR Representative Signature
YES	NO		