

EMPLOYEE PAY ADVANCE AGREEMENT

I, _____, request an advance payment of \$_____ on my wages/salary payable on the payroll date of_____. I understand that I am eligible for no more than two emergency payroll advances per calendar year and that the amount requested shall not exceed 60% of my earnings to date for the current month.

If this request is approved, I would like to receive this advance by (check one box):

Physical Check

Direct Deposit

By signing this form, I authorize Company to make deductions from my paycheck to repay this advance through either: 1) one payroll deduction to be made from wages/salary payable the first pay period immediately following the pay period from which this advance is made or: 2) from equal deductions from the next pay periods immediately following the pay period from which this advance is made.

I also agree that if I terminate employment prior to total repayment of this advance, I authorize Company to deduct any unpaid advance amount from any wages/salary owed me at the time of termination of employment.

Approved by: _____

Employee Name: _____

Employee Signature: _____

Date: _____