

PUYALLUP TRIBE OF INDIANS



REQUEST FOR EARLY PAYCHECK

	TODAY'S DATE:			
PLEASE PRINT:				
EMPLOYEE NAME:		DEP	Γ:	
	ve payment: Rapid! Paycard			
POSITION:				
THIS REQUEST. THIS DEPARTMENT AT LE EARLY PAYCHECKS	(s) AND LEAVE REQUEST FO S REQUEST MUST BE SUBMI EAST TWO (2) WORKING DAY WILL BE DISTRIBUTED ON T ON, BUSINESS, SICK OR FUN	TTED TO TH S PRIOR TO HE LAST DA	E ACCOUNTI THE DATE RI Y BEFORE TH	NG EQUESTED.
REASON (An early pay	check may only be issued for one	of the following	reasons):	
☐ ANNUAL LEAV	/E	□ MEDICAL		
☐ SICK LEAVE		☐ HOUSING		
☐ FUNERAL LEA	AVE	☐ CAR REPAIR		
☐ TRAVEL/TRAII	NING	☐ CAR INSURANCE		
☐ BIRTHDAY LE	AVE	☐ OTHER EMERGENT NEED		
REQUESTED BY:			DATE:	
SUPERVISOR:			DATE:	
ADMIN MANAGER:			DATE:	
LEAVE DATES	TYPE OF	LEAVE		HOURS