YAMHILL COUNTY SHERIFF'S OFFICE
ACCRUED VACATION /COMP. TIME HOURS SELL BACK REQUEST

Name: _____ Employee Number: _____

☐ I request to sell back (cash in) _____ hours accrued vacation time.

☐ I request to sell back (cash in _____ hours accrued comp time.

I understand that hours sold back will be paid in cash based on my existing salary level. I understand that payment will be made as part of my next regular paycheck if conditions stated below are met. (I'll ask accounting if I have questions about when payment will be made.) I understand that this request is subject to the following:

1 a. Vacation Sellback - Employee must have at least one year of continuous service with Yamhill County to be eligible for this benefit. An employee with one year or more of continuous service who has more than 150 accrued vacation hours on the books may sell up to 40 hours back to the county so long as a minimum of 150 hours remain on the books. (Example: Employee has 170 hours on the books. The employee is eligible to sell back up to 20 hours so as to maintain the 150 hours minimum.)

b. Comp Time Sellback – Employee must have at least one year of continuous service with Yamhill County to be eligible for this benefit.

2. The request must be approved by a Sergeant and a Captain prior to selling back accrued vacation hours. Their signatures on this form constitute approval.

3. The Sheriff's Executive Assistant will verify that the employee has accrued the minimum 150 hours and that sufficient accrued vacation time is available to exercise this benefit.

4. Once timesheets and this approved form have been submitted, the Accounting Division will confirm the Executive Assistant's verification. If questions arise with regard to the employee's eligibility to exercise the benefit, the Accounting Division may decline to process the request until the questions are satisfactorily answered.

5. By action on November 30, 2004, the Board of Commissioners extended this benefit to employees of the Yamhill County Sheriff's Office only. This benefit may be rescinded at any time by the Board and is effective as of the pay period ending December 8, 2004.

_____ _____
Employee Signature Date Sergeant Signature Date

_____ _____
Captain Signature Date Admin. Manager/AOS Date

FOR ACCOUNTING USE ONLY:

Hours approved for sellback:_____ Authorized by:_____ Date:_____

B.O. 04-826