

SCAPPOOSE SCHOOL DISTRICT 1J

Draw Request

Instructions: Please fill out the blanks and sign the bottom. You are allowed to draw against days worked only.

Certified Staff: As per Article 5 Section 5.9 of the Agreement between Scappoose School District 1J and Scappoose Association of Classroom Teachers, the additional option of three advance draws per year will be allowed. Under no circumstances will the amount of the draw exceed the amount of accrued pay at the time of each draw. The amount of the draw shall be deducted from the paycheck for the month in which it occurred.

Classified Staff: As per Article 8 Section 6 of the Agreement between Scappoose School District 1J and Scappoose Federation of Classified Employees, the option of three (3) advance draws per year will be allowed. The amount of the draw shall be deducted from the paycheck for the month in which it occurred. In no case shall the amount of the draw exceed the amount of accrued pay at the time of the draw. If more than 3 draws are needed by an individual, it is at the discretion of the Superintendent.

Please note that the amount of the draw will be deducted from the paycheck for the month in which it occurs.

Date of Request: _____

I, _____, would like to request a draw in the amount of
(Please Print)

\$ _____ Employee Social Security Number _____ - _____ - _____

Signed,

Check one:

_____ I would like my check mailed.

_____ I would like to pick up my check on _____ at _____

** (Please allow 2 business days from request date to process) Date Time

(If not marked, your draw check will be mailed on the day it is ready)

Payroll Dept Use Only:

Date Received: _____

Paydraw Number: _____

Date Entered PR: _____

Voucher #: _____

Manual Check #: _____

Date Check ready: _____