



**DU PAGE COUNTY
REQUEST FOR EARLY DISBURSEMENT OF
RETENTION BENEFITS**

- **Submit this completed form to the home department no later than ten (10) days prior the requested pay date. If submitted later than ten (10) days, it will be processed on the next paycheck.**

Print Name _____ Employee ID Number: _____

Department Name: _____

Attached is my letter of resignation from County employment indicating my last day of work will be:

Date

I am requesting early payment of the Retention Benefits that I have earned. My request is no more than 6 months prior to the last date worked. I realize that I will be paid the Retention Benefit based on my eligible years of service as of today's date. Should I become eligible for additional retention days after today's date but before my last day of work with the County, those days will be paid at the point I pass the threshold of eligibility.

Employee Signature: _____ Date: _____

***Please include your requested retention pay schedule below:**

Pay Date Requested	Retention Requested (in hours)

cc: Human Resources Department