LEAVE CASH-OUT PRE-DESIGNATION AGREEMENT
FOR CALENDAR YEAR 2024
Board of Supervisors

Must print in Black or Blue ink ONLY

Employee ID	Rcd No.	Last Name, First Name	
Company	**Union Code**	**Department**	**Telephone**

I elect to convert the following number of Vacation and Holiday Leave hours to cash:

Vacation Leave Hours	Holiday Leave Hours
Number of hours designated may not be less than 10 and may not exceed the annual amount to be accrued for the next calendar year (maximum 160 hours).	Number of hours designated may not be less than 8 and may not exceed the annual amount to be accrued for the next calendar year (maximum 120 hours).

I understand and accept the following conditions regarding my designation:

1. I must complete, sign and submit this Agreement no later than **December 29, 2023** in order to cash out the above hours in **calendar year 2024** without incurring a 10% penalty.

2. Signing this Pre-Designation Agreement does **not** restrict my ability to use the Vacation and/or Holiday Leave I accrue during **calendar year 2024.**

3. This designation is *irrevocable*. If I have not submitted a Leave Cash-Out Request form or used the leaves for the total predesignated hours indicated above by the end of pay period **25/24**, any designated hours remaining after pay period **25/24** processes will be automatically cashed out and will be added to my earnings for pay period **26/24**.

4. I understand that if my employment is terminated prior to pay period **26/24**, I must also submit a Leave Cash-Out Request form prior to my separation to have any remaining leave hours requested above count as earnable compensation, if applicable. If I do not complete the Leave Cash-Out Request form prior to separation, remaining leave balances from the above designation will be cashed out along with other applicable leave balances after separation and will not be considered earnable compensation.

5. I understand that failure to adhere to these rules can result in adverse tax consequences for all County employees. **Therefore, I must complete, sign and return this Pre-Designation Agreement to my Payroll Specialist by December 29, 2023. Any forms received after this date will not be honored.**

Employee Signature	Date
Appointing Authority or Designee (Print & Sign - no signature stamps**)**	**Date**

Payroll Specialist (Print & Sign - no signature stamps)	Telephone	Mail Code	Date

Office Use Only (Eligibility Verification)

VOE Complete	Signatures	Signature Dates	Reviewed By/ Date

DISTRIBUTION: 1st Review - Department Payroll Representative
Final Review - Central Payroll (0032)