



County of El Dorado

OFFICE OF AUDITOR-CONTROLLER

JOE HARN, CPA
Auditor-Controller

TSUNG-KUEI HSU
Chief Assistant Auditor-Controller

RE-ASSIGNMENT OF EARNED HOURS

Hours may only be donated to employees who have exhausted all their leave hours and whose illness will keep them from reporting to work for the equivalent of ten or more days.

Local One / LEMA / CA / MA / Unrep.	4 hour increments	
Probation	1 hour increments (VA or CTO)	16 hours max per donating employee
Operating Engineers	1 hour increments	16 hours max per donating employee
Deputy Sheriff's Association	1 hour increments	16 hours max per donating employee

****Always consult specific MOU for additional guidelines and/or updates in language****

****Please Print Clearly****

Number of Hours to be donated _____ Type of leave hours _____

Employee DONATING Hours:

Name: _____

Fenix ID # _____

Department: _____

Signature: _____ Date: _____

Department Head Signature: _____ Date: _____

Employee RECEIVING Hours:

Name _____

Fenix ID # _____

Department _____

Signature: _____ Date: _____

I understand that the amount of donated time paid to me will be included as taxable income.

Department Head Signature _____ Date: _____

I understand that the donated time will be charged to my department when paid.

Auditor/Controller Payroll Use Only:

Transfer of Hours Completed:

Pay Period: _____ Date: _____