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ASST. COUNTY EXECUTIVE OFFICER HUMAN RESOURCES DIRECTOR

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ASST. HUMAN RESOURCES DIRECTOR

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SEIU MEMBERS – EXCESS MANDATORY FURLOUGH HOUR(S) CLAIM FORM EMPLOYEE NAME ______ EMPLOYEE NUMBER _____

POSITION	DEPARTMENT	
At any time during the 2009-2010 SEIU contract we those required in the MOU?	ere you mandated to <u>furlough</u>	more hours than
YES NO		
Check which statement applies:		
I was mandated to furlough more than the required 207 hours during the term of the 09/10 MOU.		
☐ I was mandated to furlough more than 9 hours p	per pay period during the term of	the 09/10 MOU.
Please provide any documentation (e.g., pay stubs, or emails from management, etc.) that would support your claim of being required to furlough more than the requisite 207 hours for the term of the contract or more than the 9 hours per pay period, and indicate the pay-period(s) and excess hours for each.		
Comments:		
Employee Signature	Phone/Micro	Date
This following section must be completed by employee	's immediate supervisor/manager	prior to submission.
Was this employee required to take excess manda MOU?	tory furlough hours during the	term of the 09/10
YES NO		
Supervisor Signature	Phone/Micro	Date
Print Name		

HR-ER, at Mail Stop 1150

Mail Form to: