



**ECTOR COUNTY, TEXAS  
HUMAN RESOURCES DEPARTMENT**

**EMERGENCY PAYROLL REQUEST FORM**

\_\_\_\_\_ may receive his/her paycheck on  
\_\_\_\_\_ prior to the scheduled payday of \_\_\_\_\_,  
20\_\_ because he/she will be out of town or unavailable to be in the office.

\_\_\_\_\_  
Signature of Department Head/Elected Official

\_\_\_\_\_  
Department Name

.....  
**PAYROLL USE ONLY**

Date Processed by Payroll \_\_\_\_\_

Check Number Issued \_\_\_\_\_

Voided Payroll Check Number \_\_\_\_\_

\_\_\_\_\_  
Signature of employee (*to be signed when check is received*)

\_\_\_\_\_