## **UW Madison Employee Request to Serve as an Election Official**

appointment and give completed form to your Supervisor for approval.			
Employee Name: Last, First, Middle Int.			
Name of Employing Unit			
Date(s) Requested Off:			
Municipal Clerk's Name		Telephone Number	
SECTION 2 – Supervisor, approve or deny and return a copy to the employee.  Approved  Denied			
	Supervisor Signature		
I understand that if I have not provided verification of the appointment with this request that my employing unit can request verification from the Municipal Clerk named above. I also understand that upon completion of the election official duties, I will complete Section 3 and return the form to my supervisor.			
Date (Mo/Day/Yr)	Employee	Signature	
SECTION 3 – Employee complete the following information and return the form to your supervisor for payroll processing.			
Amount Earned as an Election Official \$		\$	
I certify that I received the above compensation for my services as an election official. I understand that according to Wis. Stats. 7.33 (5) this amount will be deducted from my pay that is normally earned for the scheduled working hours during the time I served as an election official and that there will be no loss of fringe benefits earned during this time.			
Date (Mo/Day/Yr)	Employee S	Employee Signature	

Supervisor--send this form to employing unit payroll for processing.