**ACKNOWLEDGEMENT OF RECEIPT**

 **GIFT CARD / AWARD CERTIFICATE**

**\_Employee name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** received the gift card / certificate award. The amount of the gift card/award certificate will be adjusted for applicable taxes and updated on my next paycheck in accordance with IRS regulations, County PPM CW‐F‐019 and Ordinance 86‐19.

Date of Receipt:

Amount of Gift Card/Certificate:

Gift Card/Certificate Number:

Gift Card Vendor:

Employee Signature:

Department:



\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Department Head Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department Head Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

***Forward the Original and one copy to the Payroll Department***