

TIKIGAQ CORPORATION
Early Pay Request

Employee's Name: _____

Supervisor: _____ Date of Request: _____

REASON FOR ADVANCE:

Check to be Picked up on: _____
(Date)

At:

- Picked up at Point Hope Office
- Picked up at Anchorage Office
- Other, please specify _____

Employee Signature: _____

Date: _____

Supervisor Signature: _____

Date: _____

Executive Signature: _____

Date: _____