



DEPUTY SHERIFFS' SUPPLEMENTAL PAY BOARD

Members:

Gary Bennett
Louisiana Sheriffs' Association

John M. Schroder, Sr.
State Treasurer

Jay Dardenne
Commissioner of Administration

CERTIFICATE OF PRIOR LOUISIANA STATE POLICE SERVICE R.S. 40:1667.7(D)

RETURN COMPLETED FORM TO SHERIFF'S OFFICE

| | | | |
|---------------------|------------------------------|--|-----|
| TROOP OR SECTION | | NAME | |
| ADDRESS | | ADDRESS | |
| CITY | | CITY | ZIP |
| TELEPHONE NO. | | SOCIAL SECURITY NO. (LAST 4 DIGITS) | |
| DATES OF EMPLOYMENT | FROM TO | CLASSIFICATION | |
| DUTIES | | | |
| | | | |
| SALARY | NO. OF HOURS WORKED PER WEEK | I HEREBY CERTIFY THAT THE PERSON NAMED IN THIS APPLICATION WAS A FULL-TIME PAID EMPLOYEE OF THIS AGENCY. | |
| SUPERINTENDENT | | DATE | |

DATE LAST PAID (MONTH, DAY, YEAR) _____ **AMOUNT PAID \$** _____