



Request for FLSA Overtime Total

Please return this form to:

County of Henrico
Attn: Human Resources
4301 E. Parham Road
Henrico, VA 23228
Fax – (804) 501-7180

Please issue a FLSA Overtime Total report page for the tax year _____ for the following employee:

Name: _____ Phone: _____ Last Four of Social Security #: _____

You must provide photo identification such as a driver's license or an Employee ID Badge.

Distribution of form:

_____ Fax form to: _____

_____ Mail form to: _____

Signature: _____ Date: _____

*****Please allow five business days to process your request.

For Internal Use Only: Date Received: _____ Date Sent: _____

Request Fulfilled By: _____