

1850 E. Lincoln Hwy. Coatesville, PA 19320-2408 Secure phone/fax: 610-383-1432 www.ibc-pa.org

PAYROLL ADVANCE REQUEST and AGREEMENT TO REPAY ADVANCE

I would like to request an advance of my payroll in the amount of \$ I understand that my future payroll will be reduced until this amount is repaid in full, and that any unpaid balance after termination of my employment for any reason, is due and payable to The Institute for Behavior Change, in full, at that time and will be paid in 30 days or less.
Signature: Date: