



Ottawa County Sheriff's Office Work Agreement

_____ (Event Name) is requesting the services of the Sheriff's Office on _____ and between the hours of _____ and _____ and agrees to pay for the requested services indicated below. Payment shall be made within 30 days of receiving the final bill for services rendered.

Number

_____	Reserve Deputy(s) @ \$35.00 per hour/per Reserve Deputy (Three Hour Minimum). <i>(An additional \$10.00 per hour for any car(s) associated with the event applies.)</i>
_____	Number of cars requested with Reserve Deputy
_____	Deputy(s) @ \$80.00 per hour/per Deputy (Includes Car).

Additional Comments:

Company Name

Phone Number

Email Address

Street Address

City

Zip

Printed Name

Signature

Date

***By signing above you are agreeing to remit payment to the Ottawa County Sheriff's Office for the full balance of services rendered.

10/24/2016