



**City of Portland  
COVID-19 Response Leave Donation Form**

For State of Emergency Donations Only

**I understand that:**

- I must maintain a minimum sick leave balance of 160 hours and a vacation balance of 80 hours after my donation;
- the dollar value of my donated leave will be calculated and divided by the recipient’s hourly rate to arrive at the number of COVID-19 Response Leave hours available for use by the recipient;
- my donation is irrevocable;
- my donation is voluntary, is intended as a gift, and has been made without coercion, compensation, or for other consideration.
- any remaining donations in the COVID-19 Response Leave sharing program at the end of the declared National, State, and City state of emergency will be returned to me in a proportionate amount of my donated hours towards the total hours donated.

**I authorize the:**

- BHR Central Time Administrator to deduct from my accrued vacation leave and/or sick leave quota(s) the number of hours indicated below to be used as COVID-19 Response Leave.

**DONOR, PLEASE COMPLETE**

Donor Name: <i>(Print)</i>	Donor Personnel No. (PERNR):
Donor Bureau or Office:	Donor Position Title:
Donor Hourly Rate:	Donor Work Telephone:
Hours of Vacation Leave I Wish to Donate: _____ <i>(whole hour increments)</i>	Hours of Sick Leave I Wish to Donate: _____ <i>(whole hour increments)</i>
<input type="checkbox"/> Vacation donation includes vacation over the maximum	
If requested, I authorize the COVID-19 Response Leave Designee to disclose to the recipient(s):	
My name: <input type="checkbox"/> NO <input type="checkbox"/> YES      My donation amount: <input type="checkbox"/> NO <input type="checkbox"/> YES	
Donor Signature:	Date:

**TO BE COMPLETED BY THE COVID-19 RESPONSE LEAVE DONATION COORDINATOR**

		<u>Example:</u>
Total hours donated:	_____	8
Times Donor’s Hourly Rate:	_____	\$25.56
Value:	_____	\$204.48
Divided by Recipient’s Hourly Rate:	_____	\$23.72
Total Hours Received:	_____	8.62

**FORWARD COMPLETED FORM TO: [Benefits@portlandoregon.gov](mailto:Benefits@portlandoregon.gov)**