

## **EMPLOYEE SUGGESTION FOR SAVING TAXPAYER MONEY**

### **STEP 1 – SUGGESTION SUMMARY**

Employee name: \_\_\_\_\_

Department: \_\_\_\_\_ Date of Submission to Department Head: \_\_\_\_\_

Briefly describe your idea: (Please attach any additional information that you feel appropriate.)

How much money do you estimate that your idea will save the county over a six month period?

In order to qualify for an award, the cost savings must be measurable over the six month period approved by the Suggestion Review Board. It will be the responsibility of the individual submitting the idea to document the savings. Briefly explain how you plan to measure the projected savings during this six month period. (Please attach any additional information that you feel appropriate.)

### **STEP II – Department Head and Review Board approval to begin the six month trial period:**

I have reviewed the recommended idea and concur that cost savings are possible:

Department head: \_\_\_\_\_ Date: \_\_\_\_\_

Suggestion Approval Board's approval to begin the six month trial period:

Brandon Shoupe, Commissioner: \_\_\_\_\_ Date: \_\_\_\_\_

Bill Dempsey, CAO: \_\_\_\_\_ Date: \_\_\_\_\_

Approved trial period dates: Begin: \_\_\_\_\_ End: \_\_\_\_\_

### **STEP III – Verification of cost savings: (to be completed after the six month trial period)**

Actual cost savings achieved during the six month trial period: \_\_\_\_\_

(Please provide verification detail as backup.)

Department Head Approval (signifies review and verification of savings): \_\_\_\_\_

Reviewed and approved by the Suggestion Review Board for Commission approval and award:

Brandon Shoupe, Commissioner: \_\_\_\_\_ Date: \_\_\_\_\_

Bill Dempsey, CAO: \_\_\_\_\_ Date: \_\_\_\_\_