

COLUMBIA COUNTY HUBER CENTER

HUBER ACCOUNT AGREEMENT

INMATE INFORMATION:

INMATE NAME: _____ DATE: _____
(FIRST NAME) (MI) (LAST NAME)

JACKET NUMBER: _____ START DATE: _____

EMPLOYER INFORMATION:

EMPLOYER NAME: _____

EMPLOYER CONTACT PERSON: _____

CONTACT PERSON PHONE NUMBER: _____

I REQUEST TO RECEIVE A DISBURSEMENT OF \$ _____ WHEN I AM PAID BY MY EMPLOYER WHICH IS **WEEKLY / BIWEEKLY** (CIRCLE ONE).

- ✓ I UNDERSTAND THAT I WILL RECEIVE THIS DISBURSEMENT ON THE WEDNESDAY **AFTER** MY PAYCHECK IS RECEIVED BY THE ACCOUNTING DEPARTMENT.
- ✓ MY HUBER FEES AND ANY OTHER MONIES OWED TO THE JAIL WILL BE DRAWN FROM MY PAYCHECK PRIOR TO ANY FUNDS BEING RELEASED TO ME. IF THERE IS NO MONEY AFTER HUBER FEES AND MONIES OWED TO THE JAIL, NO DISBURSEMENT WILL BE MADE.
- ✓ I UNDERSTAND THAT IF I GET PAID **WEEKLY \$96.00** WILL BE WITHHELD FROM MY CHECK. IF I GET PAID **BIWEEKLY, \$192.00** WILL BE WITHHELD FROM MY CHECK FOR HUBER FEES. HUBER FEES ARE BILLED FOR A WEEK AHEAD.
- ✓ I UNDERSTAND ALL MY MONEY IS COMBINED INTO ONE ACCOUNT. PAYROLL CHECKS ARE DEPOSITED INTO THAT ACCOUNT. HUBER FEES COME OUT FIRST. ANY OWED MONIES ARE RECOVERED NEXT. IF THERE IS MONEY REMAINING, REQUESTED DISBURSEMENT IS THEN GRANTED. REMAINING FUNDS IN THE ACCOUNT CAN BE USED TO PURCHASE CANTEEN, PHONE CARDS, ETC. MEDICAL EXPENSES ALSO COME FROM THE SAME ACCOUNT. I UNDERSTAND THAT I AM RESPONSIBLE TO LEAVE ENOUGH FUNDS IN MY ACCOUNT TO COVER WEEKLY HUBER FEES. IF I FALL BEHIND IN MY HUBER FEES MY HUBER PRIVILEGES MAY BE REVOKED.

INMATE SIGNATURE: _____