## Employee Request for Annual Leave

Employee Name:	MARK READIN	a Sowes	
I request PAID leav	e from work as follows:		
,			
Commencing: W	EDNESDAY 28"	July Zorb	
Ending:	tr ti	u	
Number of days to	be taken:		
		į.	
l request UNPAID le	eave from work as follows:		
Commencing:		· · · · · · · · · · · · · · · · · · ·	
Ending:			
Number of days to	be taken:		**************************************
	aid leave <u>cannot</u> be taken unti		
no unpaid leave ca	n be taken without the prior a	uthorisation of Richard o	r Martin.
			•
Employee's Signati	ire: May R	JMS SPECIA	ALIST JOINERY LT.
	The state of the s		
Authorised by:	Ji Land	27.	IUL 2021
¥		ACTION	COPIES
R.C. Hayhoe:			Last 183
M. O'Brien::	***************************************	Office use	only:
	, ·	Days remai	
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