

Employee Request for Annual Leave

Employe	ee Name:	HARRY	WIL	DMAN		Å.	
l reques	t PAID leave fro	om work as fo	llows:				
* *	ncing:	= 122	5 m				
Ending: Number	of days to be ta	aken:					
l request	: UNPAID leave	from work as	follows:		*		
Commen	icing:						
Ending: Number	of days to be ta	ken:					
	ote: Unpaid le d leave can be						
Employe	e's Signature:	H)		hws sp	PECIALIST JO	INERY LTD	
Authoris	ed by: .[;	1.6.			9 AUG 20	22 1	
J.R. Hayh	noe:			ACTION	COPIE		
M. O'Brie	en:		· · · · · · · · · · · · · · · · · · ·		Office use of Days remai		
DOCUMENT REFERENCE:	ADM-FM-001 HOLIDAY REQUEST FORM	VERSION NO: 1	CREATION DA	N DATE: 2	7/03/2013 2/12/2021	Page 1 of 1	