

Employee Request for Annual Leave

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	Employee	Name:	oe M	19	long	· .		
	I request F	PAID leave fron	n work as fo	llow:	s:		· .	
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	no unpaid	leave can be t	aken witho	ut the	e prior authorisation	of Dichard o	* Blartin	
			8-			JIM	S SPECIALIST JOI	
							ECIALISTIC	
	Franksiss	's Signature:	JME	Cla	227		30,	NERYLTO
	<i>Employee</i>	's Signature:		/			-8 FEB 2022	
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	Authorise	d by:					Icon	
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	J.R. Hayhe	Je:	• • • • • • • • • • • • • • • • • • • •				. Or	×~
M. O'Brien:						Office use only:		
						Days remai	ining $\underline{\mathcal{S}}$]
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