

ALL ENTRIES REQUIRE DETAILED EXPLANATION

Agency 070 (B/A) Home Org

Agency Name

Name

Employee ID Last First Appointment ID MI

Input Total

Annual Leave:

Event Date Event Type Amount
Earned AAL

Sick Leave

Event Date Event Type Amount
Special Sick ASPSL
YTD Earned ASL
Yr. Begin ASLC

Compensatory Time:

Event Date Event Type Amount
ACTC

Miscellaneous:

Table with 3 columns: Event Date, Event Type, Amount. Multiple rows for miscellaneous entries.

Prepared By Date / /

Approved By Date / /

(SHOW CALCULATIONS ON REVERSE)

\*\*\*Payroll Use Only\*\*\*

Entered (Initials) Date / /

Approved (Initials) Date / /