LEAV State of Nevada - Leave Accrual						
Agency	070	(B/A) Home	Org			ALL ENTRIES REQUIRE DETAILED EXPLANATION
Agency Name						
Name						
Employee ID	Last		First Appointn	nent ID]	
Input Total]				
Annual Leave:						
	Event Date		Event Type	=	Am	ount
		Earned	AAL			:
Sick Leave	Event Date		Event Type	_	Am	ount
	1	Special Sick	ASPSL			:
		YTD Earned	ASL			:
		Yr. Begin	ASLC			:
Compensatory T	imo:					
Compensatory 1	Event Date		Event Type		Am	ount
] [ACTC	7		:
Miscellaneous:	Event Date	_	Event Type	_	Am	ount
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Prepared By				Date	/	/
Approved By				Date	/	/
(SHOW CALCULATIONS ON REVERSE)						
Payroll Use Only						
Entered (Initials)		Date	/ /]		
Apprioved (Initial	ls)	Date	/ /]		