

Employee Interagency Annual Leave Donation and Restoration

Donor's Work Phone Number of Hours to be Donated								
Agency Division Section Unit Donor's Work Phone Number of Hours to be Donated Recipient's Name Recipient's Agency/Division/Section/Unit I am a member of the recipient's family; I am the recipient's Spouse Child (natural, adopted, step or foster) Perent (natural, adopted or step) Brother/Sister Grandphild Grandparent Brother/Sister Son/Daughter-in-law Pather/Mother-in-law Brother/Sister in-law Son/Daughter-in-law Pather/Mother-in-law I am a number of the recipient will be returned to me on a proportional basis as determined by my agency's payroll office. By my signature as donor, I certify that my relationship to the recipient is as indicated above. Misstatement of my relationship to the recipient may subject me to disciplinary action, up to and including separation from State employment. Donor's Signature Date To BE COMPLETED BY THE RECIPIENT'S PAYROLL OFFICE The number of hours shown below has been removed from the donor's accrued annual leave balance and is to be transferred to the donated leave balance of the recipient. Number of Hours Posted to Recipient Number of Hours Donated Dollar Value of Hours Donated Number of Hours Posted to Recipient Processed by Date Processed by Date Contact Phone Number Contact Fax Number Conta		THIS SECTION TO B						
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Spouse								
Brother/Sister	☐ I am a member of the recipient's fa	amily; I am the recipient's						
Brother/Sister-in-law Son/Daughter-in-law Father/Mother-in-law Aunt/Uncle Niece/Nephew	☐ Spouse	☐ Child (natural, adopted, step		or foster)				
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Communication of Previously Donated Annual Leave Status
(This section of the form <u>must be completed and returned</u> to donor's payroll office when the recipient's period of sick leave has ended, <u>even if the number of unused hours is zero</u>.)

TO BE COMPLETED BY THE RECIPIENT'S PAYROLL OFFICE		TO BE COMPLETED BY THE DONOR'S PAYROLL OFFICE		
The number of previously donated hours shown below was not used by recipient and is to be restored to donor's annual leave balance.		The number of hours shown below has been posted to donor's leave balance.		
Number of Hours Unused	Dollar Value of Unused Hours	Number of Hours Restored to Donor		
Processed by	Date	Processed by	Date	