Payroll Date: _____

Given to payroll: _____

Lew Thompson & Son Trucking, Inc. **[VACATION/ABSENTEE REPORT]**

Please fill-out and return to Human Resources to record in your file and submit to payroll for payment.

Employee Name: _____ Date: _____

Date(s) of Absence: _____

Number of Day(s) off: _____ Vacation Day(s) Available? Yes / No

Reason for Absence: _____ Vacation _____Suspension _____ Medical/Personal

Explanation if necessary: _____

Employee Signature: _____ Date: _____

Human Resources Use Only:	**Response:**
Expected in Advance?	Yes/No
Considered as?	Excused/Unexcused
Absence is	Paid/Unpaid
Acknowledgement:	