

Part IV—Agency Use Only

Donating Employee _____

Recipient _____

Annual Leave

Donor		Recipient			Date Leave Transferred
Hours X Rate of Pay	Divided By	Rate of Pay	Equal	Hours Received	
____ X ____	/	_____	=	_____	_____

Sick Leave

Donor		Recipient			Date Leave Transferred
Hours X Rate of Pay	Divided By	Rate of Pay	Equal	Hours Received	
____ X ____	/	_____	=	_____	_____

Donated Leave

Recipient		Donor			Date Leave Transferred
Hours X Rate of Pay	Divided By	Rate of Pay	Equal	Hours Received	
____ X ____	/	_____	=	_____	_____

Donated Leave

Recipient		Donor			Date Leave Transferred
Hours X Rate of Pay	Divided By	Rate of Pay	Equal	Hours Received	
____ X ____	/	_____	=	_____	_____