



**VACATION DAYS REDEMPTION APPLICATION
FOR
CENTRAL OFFICE ADMINISTRATIVE STAFF**

NAME: _____

POSITION: _____

EMPLOYEE ID #: _____

NUMBER OF DAYS TO BE REDEEMED: _____ (MINIMUM FIVE, MAXIMUM FIFTEEN)

SIGNATURE: _____

PRINT NAME: _____

DATE: _____

Note to Staff Members:

All vacation days redeemed will be taxed at the legally required rates for "Supplemental Wages" irrespective of how many days (5-15) are redeemed at one time. These days will be included in your regular paycheck, but will not change the tax rates on your regular wages.

Personnel Administrator

Date: _____

DAYS VERIFICATION BY PAYROLL _____

Initial

Date