**Office of the Governor**

**Interoffice Memorandum**

**TO: (Name of Supervisor)**

**FROM: (Name of Employee requesting leave)**

# **DATE:**

## SUBJECT: Executive Leave Plan – 2016

FROM TO # OF DAYS

**Available leave balance (before this request): \_\_\_\_\_ days**

**NOTE:**

* At-will employees receive 30 days of all purpose leave each year.
* The leave year runs from January 13, 2016 to January 12, 2017.
* Leave is reported in ½ day and full day increments.

APPROVED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (**Name of Supervisor)**