



Vacation Pay Request Form

Submitted date: _____

First Name: _____

Middle Name: _____

Last Name: _____

Vacation pay in full : Yes No

Vacation pay amount being requested:

\$ _____

Employee Signature

Date

For Internal Use Only

Vacation pay Amount paid out: \$ _____

Finance Signature

Date

Kindly send your vacation pay request to vacationpay@cplf.ca.