**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