



LEECH LAKE BAND OF OJIBWE

ACCOUNTING DEPARTMENT

One-Time Only 2021 Personal Leave Payout Request

The following is an agreement binding all parties to the 2021 Personal Leave Payout policies and procedures.

NOTE: The gross amount received will be considered as income. It will be taxed and added to your W-2.

Employee Name _____

Number of Personal Leave Hours requested _____

Employee's Signature

Employee ID or SS #

date

Phone number where employee can be reached

By signing below, I verify that the above employee is eligible for a 2021 Personal Leave Payout

Division Director Signature

date

Executive Director Signature

date

Once completed, please scan and email this form to karen.warme@llojibwe.net and Erin.cash@llojibwe.net or fax to 218-335-3616

**ALL FORMS MUST BE FULLY COMPLETED AND SIGNED AND RECEIVED BY
THE PAYROLL DEPARTMENT NO LATER THAN 4:30 PM 12/30/2021**

For Accounting Use Only

1. Employee's total Personal Leave Hours available _____
2. PL hours to be earned through by 12/31/2021 _____
3. Total Personal Leave Hours Available _____
4. Number of Personal Leave Hours in excess of 240 _____
5. Number of Personal Leave Hours to be paid _____

Payroll Signature

Date
