

McLaren Print System Order

Order No: 7282
Order Date: 2014-11-21
User: Tracy Hawk
Phone: 810-342-4917

Ship Location: 2N Attn: Tracy Hawk
401 S. Ballenger Hwy
Flint, MI 48532

Forms
Quantity: 1000
Paragon Dept No: 35010
Dept Name: Heart & Vascular
Company Number: 60

Order Total Price: 93.00

Item Number: MHCC-612
Item Description: Request for Scheduled Absence
Revision Date: 7/2014
Print: 1 sided black and white
Paper: 3 Part (White, Yellow, Pink)
Size: 8.5 x 11
Fold:
Finish:
Drill:
Misc Info:

McLean City Region McLean Upper Region
 McLean Central Michigan McLean Midwest
 McLean Eastern McLean Midland/Strong
 McLean Eastern/Leanside McLean South Michigan
 McLean Health Care McLean Post-Region
 McLean Intensive Care Other _____
 Functional Center Activity

Request for Scheduled Absence

Today's Date: _____
To: _____
From: _____

I would like to request the following time off:

PTO (for two and a half hours, one of requests must be volume of all requested days off)
 Other (List Day, Reason, etc.) _____
Date: _____
Comments: _____
Employee Signature: _____
Supervisor Signature: _____

PTO Inquiry Availability
Approved: _____ Not Approved: _____
Date: _____
Date: _____

I have read this request for time off and found it correct.

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