

McLaren Print System Order

Order No: 8931 Reprint Previous Order No: 8112
Order Date: 2015-02-11
User: Debra Osmer
Phone:

Ship Location: MGL Redi Care South
6910 South Cedar St
Lansing, MI 48911

Forms

Quantity: 100
Paragon Dept No: 67725
Dept Name:
Company Number: 810

Order Total Price: 10.87

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:

MCL 0001 Blue Report
 MCL 0002 Carbon Manager
 MCL 0003 Calendar
 MCL 0004 Claims
 MCL 0005 Claims & Billing
 MCL 0006 Health Care
 MCL 0007 Insurance Billing
 MCL 0008 Health Plan
 MCL 0009 Insurance Billing
 MCL 0010 Other

MCL 0011 Labor Report
 MCL 0012 Monthly
 MCL 0013 Billing & Drug
 MCL 0014 Claims & Billing
 MCL 0015 Health Care
 MCL 0016 Insurance Billing
 MCL 0017 Health Plan
 MCL 0018 Insurance Billing
 MCL 0019 Other

Request for Scheduled Absence

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

I would like to request the following time off:
 PTO (for two week notice, one of requests must be volume of all requested days)
 Other (for two week notice, one of requests must be volume of all requested days)

Comments: _____

PTO Request Available: _____ Not Approved
Approved: (insert name) _____
Date: _____ Employee Signature: _____
Date: _____ Supervisor Signature: _____

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 MCL 0002 Carbon Manager
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Approved: (insert name) _____
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Date: _____ Supervisor Signature: _____