

Forward original to: Fiscal

PTO TRANSFER FORM

Please transfer	* hours	from my PTO ba	lance to the	Angel Tree Program.	
Employee Name:	Signature:				
Employee #:	Dep	Department #:		Date:	_
will be the value after ap	oplicable taxes and 4	101K deferrals (if appl	icable) are dedu	our W-2 at year end. Your d ected. A donation letter wil ritable deduction on your a	l be sent to
*Employees may trans				-	
For Payroll Use:					•••••
PTO Balance:		(current)			
Less Requested:		(max 40)			
New Balance:					
Rate:					
Total Dollar Amount:					
Net Contribution:					
Daywall Initial	Data				
Payroll Initial	Date				