



Phone: 1-800-790-1280 Fax: 1-800-771-7633

Email: info@aline.ca Website: www.aline.ca

VACATION REQUEST

Name: _____ Date: _____

Department / Title: _____

Vacation Dates Requested: ____/____/____ through ____/____/____

Returning: ____/____/____

Signature of Employee Date

Approval:

Signature of Territory Manager Date

Signature of National Sales Manager Date

**Please Forward The Original To Joanne Wheeler at
jwheeler@aline.ca**



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