LBP LEASING AND FINANCE CORPORATION
(A LANDBANK SUBSIDIARY)

I. **NATURE OF LEAVE** (Mark with X):

		Date of Filing	:	10/09/2020
	Vacation Leave	Inclusive Dates	:	
X	Sick Leave	From	:	10/02/2020
	Terminal Leave	To	:	10/08/2020
	Others (Pls. Specify):			

CAUSE / PURPOSE   : (e.g., illness, personal, resignation, filial duties, etc.)
                                      Illness

II. **EMPLOYEE DATA**:

Virgilio Angeles Jr	Information Technology Unit
Name & Signature	Group/Unit

III. **APPROVAL:**

Request for leave of absence approved; services of employees can be dispensed with during the above mentioned period.

Remarks:

With Pay	Without Pay

Balance after this leave:

_____ day/s

(Specify Leave Type)

By:

MELODY CARMELA C.. MERCADO	
Name & Signature of Approving Authority	Name & Signature
Date:	Date: