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## **VACATION PAY PAYMENT REQUEST**

**STEVEDORE (002)      GEARMAN (052)      CHECKER (082)**

I wish to draw **ALL** of my vacation pay accrued to date.

I wish to draw \$                      from my vacation accrued.

I wish to **DEFER** my vacation pay. (September option only)

**UNION NUMBER:**

**NAME:**

**PAY PERIOD ENDING:**

**TO BE PAID ON:**

**I WILL BE TAKING TIME OFF FOR THE PERIOD IN WHICH THE  
PAYMENT IS REQUESTED.**

**SIGNATURE:**

**DATE:**

**Note: For payment of vacation on the next pay date, a signed authorised request for payment of vacation pay MUST be received at MDC HALIFAX prior to closing (1:00 p.m.) Thursday preceeding the date of pay. The number of requests for vacation pay is limited to a maximum of eleven (11) per year in addition and prior to the annual payout.**