



BSOOB Transit Vacation Buy Back Form

I, _____ formally request to buy back _____ hours of my accrued vacation time.

Employee signature _____
Date

Accepted _____

Denied _____ Reason for denial: _____

Director Approval Signature _____
Date

Processed payroll week ending _____ Warrant# _____

Processed by:

Printed Name _____
Date

Signature