



Commercial Builder
7138 E 29th Street · Yuma, AZ 85365
(928)344-6174 · (928)726-1375

Sick Leave Request Form

Employee Name : _____

SSN (last 4 only): _____

Supervisor: _____

Start Date	End Date	Total Days	Reason

Employee Signature _____ Date _____

Complete all lines and email to
Victor@haxtonmasonry.com or Renee@haxtonmasonry.com

Must be received by Monday before 10am Arizona time to be approved.

Date Received: _____ Approved/Denied _____

HR Mgr Signature _____ Date _____