

HOUSE OF REPRESENTATIVES
COMMONWEALTH OF PENNSYLVANIA
OFFICE OF THE CHIEF CLERK

OFFICIAL LEAVE REQUEST

I, _____, hereby request an official leave
NAME

of absence from the meeting/hearing of the _____ House Consumer Affairs Committee
COMMITTEE

to be held on _____ at _____.
DATE **TIME**

I will be absent for the following reason:

DATE

SIGNATURE

**** Submit this form to the Majority Committee Chairman prior to the Committee meeting.**