



BNSF Railway Company
TY & E Compensation Systems
P. O. Box 1738
Topeka KS 66614
(785) 676- CREW Bruce

(785) 676-5186 Fax
E-mail: bruce.wolfe@bnsf.com

Date _____

Attention: _____
Bruce Wolfe - Former BN and ATSF Territory

Please accept this as my request to transfer donated leave days to the specified individual due to Medical/Sick/Other leave.

Donating to: _____
(Employee Name) (Employee Number)

Days Donated: _____
(How Many)

Type Donation: Annual Leave (engineer)
_____ Current Year _____ Carry-Over

Personal Leave (conductor)
_____ Current Year _____ Carry-Over

Name (print) _____

Occupation _____

Employee Number _____

Signature _____

Fax request to the above fax number. If more than one employee, attach a cover list of the employees donating along with each Employee's Donated Days form keeping all documentation together.