

Town of Cortland

Annual Vacation Balance Acknowledgment & Request Form

Employee Information:

Employee Name: Harris, Robert

Employee ID (optional): [REDACTED]

Anniversary (Seniority) Date: 5/5/2021

Vacation Balances:

Annual Vacation Accrual Balance (hours): 120

18-Month Vacation Limit Balance (hours): 180

Current Vacation Balance (hours): 440

Amount Over/(Under) 18-Month Limit (hours): 260

Key Dates:

Form Submission Deadline to Finance: February 13, 2026

Board Review & Approval Meeting: February 23, 2026

Deadline to Reduce Balance Below 18-Month Limit: 5/5/~~2021~~ 2027

Employee Acknowledgment:

I acknowledge that my current vacation balance, as reported above, will be submitted to the Town of Cortland Board for consideration. If my current balance exceeds my 18-month limit, I request approval to extend the over-limit portion until my anniversary date in 2027. I understand that if my balance remains above the 18-month limit as of my 2027 anniversary date, my current vacation balance will be reduced to the limit.

Employee Signature: Robert Harris Date: 1/30/2026

Finance Department Review: Julie Wons Date: 2/19/2026

Board Approval: _____ Date: _____

Town of Cortland

Annual Vacation Balance Acknowledgment & Request Form

Employee Information:

Employee Name: Summerhill, Joel

Employee ID (optional): [REDACTED]

Anniversary (Seniority) Date: 8/29/2007

Vacation Balances:

Annual Vacation Accrual Balance (hours): 160

18-Month Vacation Limit Balance (hours): 240

Current Vacation Balance (hours): 285

Amount Over/(Under) 18-Month Limit (hours): 45

Key Dates:

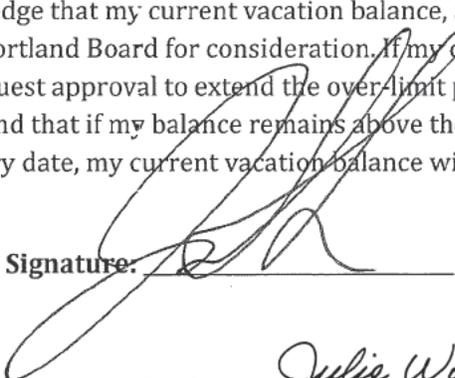
Form Submission Deadline to Finance: February 13, 2026

Board Review & Approval Meeting: February 23, 2026

Deadline to Reduce Balance Below 18-Month Limit: 8/29/2027

Employee Acknowledgment:

I acknowledge that my current vacation balance, as reported above, will be submitted to the Town of Cortland Board for consideration. If my current balance exceeds my 18-month limit, I request approval to extend the over-limit portion until my anniversary date in 2027. I understand that if my balance remains above the 18-month limit as of my 2027 anniversary date, my current vacation balance will be reduced to the limit.

Employee Signature: 

Date: 2-19-2026

Finance Department Review: 

Date: 02/19/2026

Board Approval: _____ **Date:** _____

Town of Cortland

Annual Vacation Balance Acknowledgment & Request Form

Employee Information:

Employee Name: Lanning, Travys

Employee ID (optional): [REDACTED]

Anniversary (Seniority) Date: 5/22/2006

Vacation Balances:

Annual Vacation Accrual Balance (hours): 160

18-Month Vacation Limit Balance (hours): 240

Current Vacation Balance (hours): 248

Amount Over/(Under) 18-Month Limit (hours): 8

Key Dates:

Form Submission Deadline to Finance: February 13, 2026

Board Review & Approval Meeting: February 23, 2026

Deadline to Reduce Balance Below 18-Month Limit: 5/22/2027

Employee Acknowledgment:

I acknowledge that my current vacation balance, as reported above, will be submitted to the Town of Cortland Board for consideration. If my current balance exceeds my 18-month limit, I request approval to extend the over-limit portion until my anniversary date in 2027. I understand that if my balance remains above the 18-month limit as of my 2027 anniversary date, my current vacation balance will be reduced to the limit.

Employee Signature: Travys Lanning **Date:** 2/19/26

Finance Department Review: Julie Wons **Date:** 2/19/26

Board Approval: _____ **Date:** _____