Ohio Department of Medicaid

# Union Leave Log

| Employee Name | Agency or Union |
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| Date *(MM/DD/YY)* | Comments | Out to Location *(If Applicable)* | Time Out | Time In | Supervisor and/or Manager Initials | Article Number | Time & Reporting Code |
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**TIME & REPORTING CODES**

| DAS RELEASES | | AGENCY LEVEL RELEASES *(file grievances; attend pre-d, investigation, grievance meetings):* |
|---|---|---|
| **UNPDL** – Union Leave, Non-Paid | **UNTLV** = Union Leave, Paid | **UNFAC** = Facility Release (within the worksite), Paid |
| **UNJLV** = Joint Management / Union Leave, Paid | **NPDLV** = Staff Rep. / Union Leave-Non-Paid | |