

UNITED NATION INTERIM FORCE IN LEBANON
REQUEST FOR PAYMENT OF RECREATIONAL LEAVE

CONTINGENT:

Period covered from..... to.....Page.....of.....

Srl No.	Name	Rank	ID No	Date of Arrival	Days Requested (Max-7)	Amount US \$.
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MILITARY APPROVAL

I hereby certify that for each of the abovenamed:

- (1) His assigned Tour of duty with UNIPIL is for a minimum period of six months.
- (2) He has already served a minimum period of three months with UNIFIL.
- (3) I certify that the leave will be taken outside Lebanon.

Prepared by
Paymaster

Authorised.....Lt.Col.
Commanding Officer