

ORDER FORM

Note: You may also order forms on-line at ETF's Internet site at <http://etf.wi.gov>.

DEPARTMENT OF EMPLOYEE TRUST FUNDS
P O BOX 7931
MADISON WI 53707-7931

Accumulated Leave Certification (ET-4306)
(REV 09/2004)

Quantity _____

Employer Name _____

EIN 69-036- _____

Your Name _____

Title _____

Address _____

Phone # _____

City _____ State _____

Zip Code _____