## IPOPS Actions Requiring Agency Approval

NOTE: (\*) Donated Leave forms must be received at DSP by the Agency Approval Deadline

	by me rigency ri	Pay Period Effective Dates		
Pay Date	Agency Approval Deadline (*)	Begin Date	End Date	
01/10/20	12/24/19	12/15/19	12/28/19	
01/24/20	01/08/20	12/29/19	01/11/20	
02/07/20	01/22/20	01/12/20	01/25/20	
02/21/20	02/05/20	01/26/20	02/08/20	
03/06/20	02/19/20	02/09/20	02/22/20	
03/20/20	03/04/20	02/23/20	03/07/20	
04/03/20	03/18/20	03/08/20	03/21/20	
04/17/20	04/01/20	03/22/20	04/04/20	
05/01/20	04/15/20	04/05/20	04/18/20	
05/15/20	04/29/20	04/19/20	05/02/20	
05/29/20	05/13/20	05/03/20	05/16/20	
06/12/20	05/27/20	05/17/20	05/30/20	
06/26/20	06/10/20	05/31/20	06/13/20	
07/10/20	06/24/20	06/14/20	06/27/20	
07/24/20	07/08/20	06/28/20	07/11/20	
08/07/20	07/22/20	07/12/20	07/25/20	
08/21/20	08/05/20	07/26/20	08/08/20	
09/04/20	08/19/20	08/09/20	08/22/20	
09/18/20	09/02/20	08/23/20	09/05/20	
10/02/20	09/16/20	09/06/20	09/19/20	
10/16/20	09/30/20	09/20/20	10/03/20	
10/30/20	10/14/20	10/04/20	10/17/20	
11/13/20	10/28/20	10/18/20	10/31/20	
11/27/20	11/10/20	11/01/20	11/14/20	
12/11/20	11/24/20	11/15/20	11/28/20	
12/24/20	12/09/20	11/29/20	12/12/20	