[NAME OF EMPLOYER]

[ADDRESS OF EMPLOYER]

[DATE]

Via e-mail: [EMAIL ADDRESS]

 Re: Paid Sick Leave

Dear [NAME]:

Several laws have recently passed providing paid sick leave to workers in Los Angeles.

I am entitled to XXXX hours of paid sick leave during the COVID-19 state of emergency.

I am requesting to take paid sick leave because (choose one):

* I am sick. (48 hours)
* I am caring for a family member who is sick. (48 hours)
* I am taking preventative care of myself. (48 hours)
* I am taking preventative care of a family member. (48 hours)
* I have a doctor’s appointment. (48 hours)
* My family member has a doctor’s appointment. (48 hours)
* I am sick with COVID-19. (128 hours)
* I am caring for a family member who is sick with COVID-19. (128 hours)
* I am 65 years old. (128 hours)
* I have a health condition that makes me vulnerable to COVID-19. (128 hours)
* My healthcare provider has advised that I stay home to stop the spread of COVID-19. (128 hours)
* I am caring care for a child whose school has closed or normal care is unavailable due to COVID-19-related reasons. (128 hours)

If you have a different understanding of how much paid sick leave I can take, please let me know so that we can discuss.

Sincerely,

[YOUR NAME]