

# Carlson Building Maintenance

**Backpay Form**

04-24-2026

## Backpay Form

Employee name: Angelina Hernandez Flores Employee number: 12944

**Missed Pay (to be added through the employee's next generated check):**

Date:	In:	Left for lunch:	Return from lunch:	Out:	Total hours:
04-06-2026	04:00 AM	12:00 PM	12:00 PM	12:00 PM	8.00 hrs

**Location:** 269 Lunds & Byerly's France Ave

**Reason this pay was missed:** \_\_\_\_\_

**\*\*Signature/Approval - Please make sure to sign and print your name before turning in this form.**

Joe Schaeppi  
Manager

  
Manager Signature

04-24-2026  
Date