



Carlson Building Maintenance

Backpay Form

10-14-2024

Backpay Form

Employee name: Fidelina Garcia Employee number: 14128

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

Date:	In:	Left for lunch:	Return from lunch:	Out:	Total hours:
09-27-2024	05:30 AM	No Time	No Time	10:30 AM	5.00 hrs

Location: 649 T0895 Bourbonnais IL

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

10-14-2024
Date