



# Carlson Building Maintenance

**Backpay Form**

**12-02-2024**

## Backpay Form

Employee name: Lucas Galan Employee number: 14484

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

Date:	In:	Left for lunch:	Return from lunch:	Out:	Total hours:
11-15-2024	08:00 PM	08:15 PM	08:15 PM	01:00 AM	5.00 hrs

**Location:** 330 Festival Foods Hartford, WI

**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

12-02-2024  
Date