

Carlson Building Maintenance

Backpay Form 04-21-2024

Backpay Form					
Employee name:		Maria Del Carmen Diaz Employee nu		ımber:	14788
Missed P check):	ay (to be	added through	the employee's n	ext gen	erated
Date:	In:	Left for lunch:	Return from lunch:	Out:	Total hours:
03-24-2024		No Time	No Time	10:30 AM	5.00 hrs
		B Appleton WI missed: enable to p	ounch manager forgot	to do a m	nanual entry
**Signature this form.	e/Approval	- Please make sure t	o sign and print your	name bef	ore turning in
Joe Schaepj Manager	pi _	┌	ger Signature	(04-21-2024 Date