



# Carlson Building Maintenance

**Backpay Form**

02-12-2024

## Backpay Form

Employee name:                     kevin jose                     Employee number:           14954          

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

Date:	In:	Left for lunch:	Return from lunch:	Out:	Total hours:
01-22-2024	08:00 AM	No Time	No Time	03:30 PM	7.00 hrs

**Location:**           495 Holiday Inn Alexandria, MN          

**Reason this pay was missed:**           missed punch          

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

Joe Schaeppi		02-12-2024
Manager	Manager Signature	Date