



Carlson Building Maintenance

Backpay Form

02-20-2025

Backpay Form

Employee name: Carlos Salinas Employee number: 15525

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

Date:	In:	Left for lunch:	Return from lunch:	Out:	Total hours:
01-13-2025	05:00 AM	No Time	No Time	11:00 AM	6.00 hrs

Location: 614 T2223 Medina MN

Reason this pay was missed: EE Had Phone/Punch In Issues He let me know, I forgot to submit CBM Form

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

Joe Schaeppi
Manager

Manager Signature

02-20-2025
Date