



# Carlson Building Maintenance

## Backpay Form

09-03-2025

### Backpay Form

Employee name: Lemoyne, Ericka Dawn Employee number: 16165

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

Date:	In:	Left for lunch:	Return from lunch:	Out:	Total hours:
08-18-2025	11:00 PM	No Time	No Time	04:45 AM	5.00 hrs

**Location:** 208 Meijer Marquette MI

**Reason this pay was missed:** \_\_\_\_\_

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

Joe Schaeppi

A handwritten signature in black ink, appearing to be 'JS' followed by a stylized 'M' or 'N'.

Manager

Manager Signature

09-03-2025

Date