



Carlson Building Maintenance

Backpay Form

09-25-2025

Backpay Form

Employee name: Alberth Lu Gomez Employee number: 16169

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

Date:	In:	Left for lunch:	Return from lunch:	Out:	Total hours:
09-13-2025	06:00 AM	No Time	No Time	10:45 AM	-283.00 hrs

Location: 568 T1522 Red Wing MN

Reason this pay was missed: this EE missing time problem with the phone

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

Joe Schaeppi [Signature]
Manager

Manager Signature

09-25-2025
Date