



Carlson Building Maintenance

Backpay Form

11-03-2025

Backpay Form

Employee name: Emmanuel Gomez Employee number: 16402

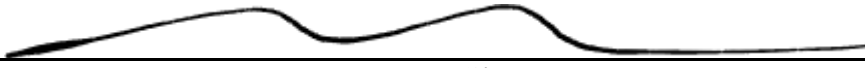
Missed Pay (to be added through the employee's next generated check):

Date:	In:	Left for lunch:	Return from lunch:	Out:	Total hours:
10-16-2025	10:00 PM	10:00 PM	10:00 PM	03:15 AM	5.00 hrs
10-17-2025	10:00 PM	10:00 PM	10:00 PM	03:15 AM	5.00 hrs
10-18-2025	10:00 PM	10:00 PM	10:00 PM	03:15 AM	5.00 hrs

Location: 300 Festival Foods Kenosha, WI

Reason this pay was missed: _____

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

Joe Schaeppi  11-03-2025
Manager Manager Signature Date