

Carlson Building Maintenance

Backpay Form

02-01-2026

Backpay Form

Employee name: Oneyda Rivera Employee number: 16624

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

Date:	In:	Left for lunch:	Return from lunch:	Out:	Total hours:
01-16-2026	02:00 AM	No Time	No Time	07:00 AM	365.00 hrs

Location: 209 Meijer Wauwatosa WI

Reason this pay was missed: _____

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

Joe Schaeppi

Manager



Manager Signature

02-01-2026

Date