

Carlson Building Maintenance

Backpay Form

03-05-2026

Backpay Form

Employee name: Oneyda Sofia Rivera Soza 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:
02-11-2026	11:30 PM	No Time	No Time	04:30 AM	5.00 hrs

Location: 213 Meijer Greenfield 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

03-05-2026
Date