



Carlson Building Maintenance

Hotel Form

06-10-2024

- **Hotel request must be requested ahead of time.**
- **Select numbers of rooms**
- **Select numbers of beds (Single or double)**
- **Notify the employee to check in by 3pm.**
- **Specify employee name under hotel**
- **Employee name under hotel must have an I.D.**
- **Employee must pay deposit for incidentals.**
- **Any No Call No Show/Cancel will be a company loss.**

District Information

Dm: | Jose Martinez

Job Information

Store: | 616 T0807 Oshkosh WI

Job Information

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|-----------------|------------|----------------|------------|
| Check In: | 06-10-2024 | Check Out: | 06-13-2024 |
| How many rooms: | 1 | How many beds: | 1 |

Employee Information

New Employee Name | Albornoz Delgado, William Yohandrys #15280

Job Information

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|--------------------------|----------|---------------|---------|
| Site visit/Project type: | Full DSR | Order number: | T234234 |
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Notes

Office use only

Notes