



Carlson Building Maintenance

Hotel Form

04-22-2024

- **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: | Pedro Amaro

Job Information

Store: | 560 T0620 Onalaska WI

Job Information

Check In:	04-22-2024	Check Out:	04-27-2024
How many rooms:	1	How many beds:	2

Employee Information

New Employee Name | Reinaldo espinosa/ Nancy caballero

Job Information

Site visit/Project type:	Full SR	Order number:	T234234
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Notes

This PS work on project

Office use only

Notes