



# Carlson Building Maintenance

**PTO Form**

**07-13-2025**

## PTO Form

Employee name: Amada -Rivera

Employee number: 10965

Department: Human Resources

Manager: Cruz Hernandez

Dates of absence: From: 06-30-2025 To: 07-10-2025

Number of hours 34.0

## Manager Approval

☒ Approval

Comments:

She had to take these days off as an emergency. I already sent the doctor's note to Skyler.

Manager Signature

07-13-2025

Date