



Carlson Building Maintenance

PTO Form

11-16-2025

PTO Form

Employee name: Ana -Cruz

Employee number: 11493

Department: Human Resources

Manager: Cruz Hernandez

Dates of absence: From: 11-11-2025 To: 11-15-2025

Number of hours 15.0

Manager Approval

☒ Approval

Comments:

she is one of the employees who was laid off. Thanks

Manager Signature

11-16-2025

Date