



# Carlson Building Maintenance

**PTO Form**

**01-27-2025**

## PTO Form

Employee name: Sandra -Garcia

Employee number: 13865

Department: Service

Manager: Pedro Amaro

Dates of absence: From: 01-30-2025 To: 01-31-2025

Number of hours **16.0**

## Manager Approval

Approval

Comments:  
this EE request for this PTO

  
\_\_\_\_\_  
Manager Signature

01-27-2025  
Date