

Carlson Building Maintenance

PTO Form 10-07-2024

| | | PTO Form | | | |
|------------------------------------|-------------------|------------------|-----|------------|--|
| Employee name: | Josefina -Gerrero | | | | |
| Employee number: | 13981 | | | | |
| Department: | Service | | | | |
| Manager: | | Pedro Amaro | | | |
| Dates of absence: | From: | 10-06-2024 | To: | 10-12-2024 | |
| Number of hours | 41.0 | | | | |
| | M | Ianager Approval | | | |
| ☑ Approval | | | | | |
| Comments: this EE request for this | s PTO | | | | |
| <u>بر</u> | | | | 10-07-2024 | |
| Manager Signature | | | Da | te | |