



Carlson Building Maintenance

PTO Form

12-30-2024

PTO Form

Employee name: Luis-

Employee number: 14772

Department: Service

Manager: Lino Huerta

Dates of absence: From: 12-28-2024 To: 12-30-2024

Number of hours 19.5

Manager Approval

Approval

Comments:
he requested this to be paid as sick time

Manager Signature

12-30-2024

Date