



# Carlson Building Maintenance

**PTO Form**

**09-08-2025**

## PTO Form

Employee name: Araceli-Hernandez

Employee number: 14886

Department: Service

Manager: Bob Kay

Dates of absence: From: 08-27-2025 To: 08-28-2025

Number of hours 10.0

## Manager Approval

☒ Approval

Comments:

A handwritten signature in black ink, appearing to read 'Bob Kay', is written over a horizontal line.

Manager Signature

Date

09-08-2025