Carlson Building Maintenance

PTO Form 11-17-2025

		PTO Form			
Employee name:	Linda Cruz				
Employee number:		15438			
Department:		Service			
Manager:		Pedro Amaro			
Dates of absence:	From:	11-17-2025	To:	11-18-2025	
Number of hours	4.0				
	N	Ianager Approval			
☑ Approval					
Comments: this EE request for thi	s PTO				
				11-17-2025	
Manager Signature			Dat	te	