



# Carlson Building Maintenance

**PTO Form**

**09-22-2025**

## PTO Form

Employee name: Noemi-Aguirre

Employee number: 15446

Department: Service

Manager: Bob Kay

Dates of absence: From: 09-03-2025 To: 09-07-2025

Number of hours 25.75

## Manager Approval

☒ Approval

Comments:

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

Manager Signature

Date

**09-22-2025**