

Carlson Building Maintenance

PTO Form 01-23-2025

		PTO Form			
Employee name:		Jose -Avalos			
Employee number:		15457			
Department:		Service			
Manager:		Lino Huerta			
Dates of absence:	From:	01-20-2025	To:	01-21-2025	
Number of hours	8.0				
	N	Ianager Approval			
☑ Approval Comments: The employee called t	hat was sick a	and is requesting to	o pay sick tim	ne	
0				01-23-2025	
Manager Signature			Dat	e	