



# Carlson Building Maintenance

**PTO Form**

**11-03-2025**

## PTO Form

Employee name: Jose-Luna

Employee number: 15500

Department: Service

Manager: Bob Kay

Dates of absence: From: 10-26-2025 To: 11-02-2025

Number of hours 42.0

## Manager Approval

☒ Approval

Comments:

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

Manager Signature

Date

11-03-2025