

## **Carlson Building Maintenance**

**PTO Form** 12-30-2024

		PTO Form		
Employee name:	Margaro-Gamino			
Employee number:	4639			
Department:	Service			
Manager:	Bob Kay			
Dates of absence:	From:	12-22-2024	To:	12-24-2024
Number of hours	24.0			
	N	Ianager Approval		
☑ Approval				
Comments:				
	7	<u> </u>		12-30-2024
Manager Signature			Da	te