

## **Carlson Building Maintenance**

**PTO Form** 12-02-2024

		PTO Form		
Employee name:		Lu	cas-Jiminez	
Employee number:	5212			
Department:	Service			
Manager:	Bob Kay			
Dates of absence:	From:	11-02-2024	To:	11-08-2024
Number of hours	39.9			
	M	Ianager Approval		
Approval				
Comments:				
	$\neg v$			12-02-2024
Manager Signature	Date			