



Carlson Building Maintenance

PTO Form

08-08-2024

PTO Form

Employee name: Norma-Aranda

Employee number: 6702

Department: Service

Manager: Eduardo Espejel

Dates of absence: From: 08-08-2024 To: 08-08-2024

Number of hours 5.0

Manager Approval

Approval

Comments:

Ee is taking this day off and would like to get it paid from her pto

Manager Signature

08-08-2024

Date