



# Carlson Building Maintenance

**PTO Form**

**12-16-2024**

## PTO Form

Employee name: Araceli -Cruz

Employee number: 7148

Department: Service

Manager: Pedro Amaro

Dates of absence: From: 12-16-2024 To: 12-30-2024

Number of hours **79.0**

## Manager Approval

Approval

Comments:  
this EE request for this PTO

\_\_\_\_\_  
Manager Signature

\_\_\_\_\_  
Date

12-16-2024