

# Carlson Building Maintenance

**PTO Form**

**03-30-2026**

## PTO Form

Employee name: Nancy Caballero

Employee number: 8232

Department: Service

Manager: Pedro Amaro

Dates of absence: From: 03-30-2026 To: 04-03-2026

Number of hours 40.0

## Manager Approval

Approval

Comments:  
this EE request for this PTO

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

03-30-2026  
\_\_\_\_\_  
Date