Carlson Building Maintenance

PTO Form 11-17-2025

		PTO Form			
Employee name:		Nancy Caballero			
Employee number:		8232			
Department:		Service			
Manager:		Pedro Amaro			
Dates of absence:	From:	11-17-2025	To:	11-21-2025	
Number of hours	39.0				
	N	Ianager Approval			
☑Approval					
Comments: this EE request for thi	s PTO				
Manager Signature			Do	11-17-2025	
Manager Signature			Dat	ie –	