## UNIFORM AND TOOLS TRACKING FORM

<b>Employee Name:</b>		Phone	# Order D	ate: Release Date:				
ITEM#	QTY	SIZE	DESCRIPTION	EMPLOYEE PRICE	RECEIVED BY			
1.								
2.								
3.								
By signing below, I understand that I am responsible to keep the uniform in good conditions and that it will be deducted 100% out of my payroll check in case of not showing up to work, lost, theft, damaged etc; Uniform & tools are 50% out of cost and its deduct it from Payroll Check second week of starting.								
Employee S	signature:			Date:				

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Employee Name:		Phon	e# Order D	ate:	Release Date:	
ITEM#	QTY	SIZE	DESCRIPTION	EMI	PLOYEE PRICE	RECEIVED BY
1.						
2.						
3.						
100% out o	f my payroll	check in case o	m responsible to keep the of not showing up to work, heck second week of starti	lost, thef	~	
Employee S	ignature:				Date:	
		4200 Sou	eyna & Canales Corp DBA th Freeway Suite #1118 and	1128 For	t Worth, TX 76115	

Phone: (817) 921-1690 Fax: (817) 921-1910

Email:lgp@canalesfurniture.com