## UNIFORM AND TOOLS TRACKING FORM

Employee Name:		Phor	ne # Order D	ate:	Release Date:				
ITEM#	QTY	SIZE	DESCRIPTION	EM	PLOYEE 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:				
Holguin LLC DBA Canales Furniture									
600 N Highway 77 Suite # E Waxahachie Texas 75165									

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