UNIFORM AND TOOLS TRACKING FORM

Employee Name:		Phone	# Order D	ate: Release Date:		
ITEM#	QTY	SIZE	DESCRIPTION	EMPLOYEE PRICE	RECEIVED BY	
1.						
2.						
3.						
			not showing up to work, seck second week of starti	lost, theft, damaged etc; Uniforing.	n & tools are 50% out	
Employee Signature:				Date:	_ Date:	
		FBG	S CORP DBA Can	ales Furniture		
		20	021 N Town E Blvd Mes Phone: (972) 68	· ·		
		!	Email: <u>mesquite@canale</u>			

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Employee Name:		Phone #	Order Dat	e: 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	ignature:			Date:					
			CORP DBA Cana						
		202	21 N Town E Blvd Mesq	•					

Phone: (972) 682-4305

Email: mesquite@canalesfurniture.com