## **ENCLOSURE 3.1**



## ACKNOWLEDGEMENT OF COMPANY-ISSUED EQUIPMENT

Name:\_\_\_\_\_ Date: \_\_\_\_\_

I acknowledge receipt and acceptance of the below referenced equipment. Upon termination of my employment with (Client Company), I agree to return this equipment in acceptable working order.

In the event the equipment is lost, damaged or is not returned, I agree to have the purchase price deducted from my final earnings.

Qty	ITEM	MODEL/ MAKE	SERIAL #	PURCHASE PRICE
	Hard Hat			
	Safety Glasses			
	Meta-tarsal Guards			
	Full Body Harness			
	Single lanyard			
	Double Lanyard			

Issued by :\_\_\_\_\_ Date:\_\_\_\_\_

Authorized/Accepted By:	Date	:
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Place in employee file.

## **ENCLOSURE 3.2**



## **PURCHASE/DEDUCTION AUTHORIZATION**

Name:\_\_\_\_\_

Date: \_\_\_\_\_

I authorize (Client Company) to purchase the below referenced equipment on my behalf. I acknowledge that by completing this form I am authorizing (Client Company) to deduct the cost of this purchase from my next payroll check. I realize that all warranty issues will be my sole responsibility.

This form will authorize (Client Company) to order and Creative Business Resources' payroll department to deduct the stated amount from my next payroll check.

Equipment expressly forbidden by regulation cannot be sold to employees and is not authorized on company projects.

Qty	ITEM	MODEL/ MAKE	SERIAL #	PURCHASE PRICE
Tota				

Authorized/Accepted By:	_ Date:
Distributed By:	Date:
Deducted By:	Date:

Place in employee file.