



ACKNOWLEDGEMENT OF RECEIPT AND AGREEMENT TO ABIDE BY POLICIES IN THE EMPLOYEE HANDBOOK

I acknowledge that I have received and read the Employee Handbook dated and effective October 24, 2012, and I further acknowledge that I agree to abide by the policies, rules and regulations contained therein. I understand that the rules, policies and benefits may be changed, modified or deleted at any time, with or without notice, and that neither this handbook nor any other communication by a management representative, whether oral or written, is intended in any way to create a contract of employment for a specific term.

I further understand that I employed on an at-will basis, meaning that the Company may terminate my employment at any time and for any reason without notice, and that the Company may do the same.

Employee Name:		
Signature:		Date:



POLICY CONCERNING DEDUCTIONS FROM PAY

Although deductions from an employee's pay are permissible under certain circumstances, Anders Group, LLC ("Company") recognizes that it has a duty to its employees not to make improper deductions from any employee's pay. Therefore, unless authorized by the employee or authorized by a federal, state or local law, the Company will not make deductions from an employee's pay. If an employee believes that there has been an improper deduction of money from their pay, the employee should report this concern as set forth below (see Complaint Mechanism). If it is determined that the Company has made an improper deduction, the Company will reimburse the employee for the improper deduction(s).

Complaint Mechanism:

Employees should familiarize themselves with what deductions from pay are permissible and should monitor their paychecks to ensure that no improper deductions have been and/or are being made. If an employee believes that the Company has made an improper deduction from their pay, the employee should submit their complaint to the attention of one of the Members of the Company. The Company will evaluate the complaint and determine whether the deduction was properly authorized by the employee or otherwise allowable under federal, state, or local laws and advise the employee of the result of the Company's investigation into the complaint. If the Company determines that it has made an improper deduction from an employee's compensation, the Company will reimburse the employee(s) for any such improper deductions.

Deductions from pay are permissible under the following circumstances:

- When an exempt employee is absent from work for one or more full days for personal reasons other than sickness or disability;
- When an exempt employee has an absence of one or more full days due to sickness or disability, if the deduction is made in accordance with a bona fide plan, policy or practice of providing compensation for salary lost due to illness;
- For unpaid disciplinary suspensions of one or more full days imposed in good faith for workplace conduct rule infractions;
- If the Company is a covered employer under the Family and Medical Leave Act, for weeks in which an employee takes unpaid leave under the Family and Medical Leave Act;
- To accomplish a pro rata payment of salary during an employee's initial or final week(s) of employment.
- When the company is ordered to do so by a court of competent jurisdiction;
- When the employee provides the company with written authorization to deduct part of the wage for a lawful purpose; or
- When the company is authorized to do so by state or federal law.

I acknowledged that I have received and reviewed a copy of the Policy Concerning Deductions from Pay.

By: _____

Printed Name: _____

Date: _____



Acknowledgement and Agreement

I have received and reviewed a copy of the Use of Electronic Media & Social Media Policy and agree to abide by the policy; I further agree to bring any concerns or questions that I may have about the policy to the attention of one of the Members of the Company.

By: _____

Printed Name: _____

Date: _____



WAGE DEDUCTION AUTHORIZATION

I understand and agree that my employer, Anders Group, LLC ("the Company"), may deduct money from my pay from time to time for reasons that fall into the following categories:

1. My share of the premiums for the Company's group medical/dental plan. If the Company pays on my behalf any insurance premiums ("payments") that I would normally make under the applicable Company benefit plan, the amount of such payments made by the Company, such payments being an advance of future wages payable to me.
2. Installment payments on loans or wage advances given to me by the Company and, if there is a balance remaining when I leave the Company, the balance of such loans or advances.
3. If I receive an overpayment of wages for any reason, repayment to the Company of such overpayments (the deduction for such a repayment will equal the entire amount of the overpayment, unless the Company and I agree in writing to a series of smaller deductions in specified amounts).
4. The cost to the Company of personal long-distance calls I may make, or messages I may send, using Company phones (land lines or cell phones) or Company accounts, or personal faxes sent by me using Company equipment or Company accounts, or of non-work related access to the Internet or other computer networks by me using Company equipment or Company accounts.
5. The cost of repairing or replacing any Company supplies, materials, equipment, money, or other property that I damage (other than normal wear and tear), lose, fail to return, or take without appropriate authorization from the Company (e.g., the fair market value of computer equipment or software that is lost, damaged, or destroyed by me during my employment or that I failed to return following the termination of my employment).
6. Administrative fees in connection with court-ordered garnishments or legally-required wage attachments of my pay, limited to the amount or amounts allowed under applicable laws.
7. If I take paid vacation or personal time in advance of the date I would normally be entitled to it (e.g., prior to my having accrued the paid vacation or personal time) and I separate from the Company before accruing time to cover any paid time off provided to me in advance of having earned it, the value of such paid time off taken in advance.
8. The value of any time off for absences to which paid leave is not applied (non-exempt salaried employees will have all such unpaid leave deducted from their salary, while exempt salaried employees will experience salary reductions only in units of a full day or week at a time, depending upon the exact nature of the absence, unless partial-day deductions are specifically allowed under federal law).

I agree that the Company may deduct money from my pay under the above circumstances to the maximum extent allowed by law. I further understand that the Company has stated its intention to abide by all applicable federal and Texas wage and hour laws and that if I believe that any such laws have not been followed, I agree to advise the Company in writing of my complaint in order to allow the Company the opportunity to review my complaint and take any action necessary to ensure compliance with applicable laws.

Agreed to: By: _____
Printed Name: _____
Date: _____