

STARTING WAGES AND DEDUCTIONS

I, _____, understand that my starting rate of pay with _____. will be \$_____ per hour (excluding overtime or commission, if applicable) beginning on _____. I further understand that my normal hours of work are from _____.m. through _____.m. on normal work days from _____ to _____ and that I will be paid at _____ on the 15th and last day of the month at _____ a.m. for work performed through the prior _____. I also understand that overtime (if applicable) may be required, that such work is mandatory, and that Company will make every effort to notify me of overtime at the earliest possible time.

I understand that deductions, some voluntary and others mandatory, may be made to my paycheck during and after my employment with Company for several reasons, including, but not limited to, the following:

- ☐ Insurance Premiums
- ☐ 401(k) Contributions
- ☐ United Way Contributions
- ☐ Missing or damaged equipment, materials, supplies, etc.
- ☐ Unreturned Company property or property for which the Company is responsible
- ☐ Damage to Company or other property
- ☐ Other amounts owed the Company

I UNDERSTAND THAT MY EMPLOYMENT WITH COMPANY IS “AT-WILL,” MEANING EITHER I OR COMPANY MAY TERMINATE MY EMPLOYMENT AT ANY TIME AND FOR ANY REASON, AND THAT THIS STARTING WAGES AND DEDUCTIONS FORM IS NOT A CONTRACT OF EMPLOYMENT AND DOES NOT ALTER MY “AT-WILL” EMPLOYMENT STATUS IN ANY WAY.

Signature

Date

Printed Name